

Families and Homes Directorate
Deputy Chief Executive Linzi Roberts-Egan

Behaviour, Attendance and Children Missing Education (BACME) Service

ELECTIVE HOME EDUCATION REFERRAL FORM

This form should be completed and emailed to the BACME Service
Email: BACME-Referral@walthamforest.gov.uk

Tel: 020 8496 1701

| Section A – Contact Details | |
|--------------------------------------|--|
| Details of the person making contact | |
| Name: | |
| School/Agency/Team: | |
| Role/Job Title: | |
| Address: | |
| Contact Numbers: | |
| Date of this referral: | |

| NHS ID | Unique Pupil Number | DOB | Age | Gender | Ethnicity | Religion | In receipt of an EHC Plan |
|------------|---------------------|---------|-----|--------|-----------|----------|---------------------------|
| | | | | | | | |
| First Name | | Surname | | | Address | | |
| | | | | | | | |

| Does the child have any known disabilities or learning needs |
|--|
| |

| Details of family household members | | | | | | | |
|---|---------|--------------------------------|-----|--------|-----------------------------------|-------------------------|--|
| First name | Surname | DOB | Age | Gender | Relationship with subject | Parental Responsibility | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Parent Contact Telephone Number and Email Address | | Communication Needs (Language) | | | Legal Status (Immigration Status) | | |
| | | | | | | | |

| Key Agencies Involved | |
|-----------------------|--|
| Name: | |
| Agency: | |
| Role/Job Title: | |

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|------------------------------------|--|
| Address: | |
| Contact numbers/email: | |
| Reason for Elective Home Education | |
| | |
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| | | |
|----------------------|----------|----------|
| Expected Attainment: | | |
| Maths: | English: | Science: |
| | | |

| | | |
|----------------|-----------|------------------------|
| School Details | | |
| Start date: | End date: | Attendance percentage: |
| | | |

| | |
|---|-------|
| Date of letter from parent stating EHE (A COPY OF THE PARENT'S LETTER MUST BE ATTACHED IN ORDER FOR REFERRAL TO BE PROCESSED) <div style="display: flex; justify-content: space-around;"> Yes No </div> <div style="display: flex; justify-content: space-around;"> <input type="radio"/> <input type="radio"/> </div> | Date: |
|---|-------|

Please ensure that this form is fully completed and return to:
BACME-Referral@walthamforest.gov.uk

- Please ensure that where a child has an EHCP that the Disability Enablement Service is informed that parent has opted to Home Educate the young person.
- Where a young person is attending a Special School they cannot be removed from the school roll without the consent of the Disability Enablement Service.
- Any queries regarding Elective Home Education, please contact Mary Ryan-Hubert on the above number.

Please note – schools must also notify the School Admissions Service on their weekly school return report if a child's name is removed from the school roll as they are being home educated.