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| **POST-16 PERSONAL EDUCATION PLAN (PEP)**  **Reviewing & Planning for Success in Further/Higher Education & Training**  **For Looked after Children / Care Leavers at Year 12+** |

This form contains three sections: Section 1 to be completed by the Social Worker or Personal Advisor (PA) prior to the meeting, Section 2 to be completed by the education / training provider and student prior to the meeting, and Section 3 to be completed during the meeting.

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| **SECTION 1 – TO BE COMPLETED BY THE SOCIAL WORKER / PA** |

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| **Date of this PEP Meeting** |  | **Date of Next PEP** | ` | |
| **Is this the first PEP?** | **Yes ☐** | **No ☐** |  | |
| **Please tick if any of the following have changed since the last PEP?** | | | | |
| **Designated Tutor** | **Education/Training Provider** | | | **Social worker or Personal Advisor** |

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| **STUDENT PERSONAL INFORMATION** |

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| **Name** |  | | |
| **DOB** |  | **Age** |  |
| **UPN** |  | **Curriculum Year** |  |
| **Legal Status** |  | | |
| **To whom should information be sent regarding the student:** | | | |

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| **CARER & SOCIAL WORKER CONTACT DETAILS** |

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| **Carer / Key Worker:** | **Social Worker:** |
| **Type of Placement:** | **Personal Advisor:** |

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| **Any relevant details of the care or Pathway Plan which may impact on education (e.g. issues around contact, friendships or potential placement changes):**  **Please also include details of any care / pathway planning meetings, or similar, which the education or training provider should be aware of** |

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| **SECTION 2: TO BE COMPLETED BY THE EDUCATION / TRAINING PROVIDER** |

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| **Establishment Name & Address:** |  |
| **Designated Tutor:** | **Name:**  **Tel:**  **Email:** |
| **Title & duration of course(s) studied:** |  |

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| **WEEKLY TIMETABLE** |

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| **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| **AM** |  |  |  |  |
| **PM** |  |  |  |  |

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| **Please record the dates of any times that the students is expected to be off-timetable, or other important dates such as parents evenings or progress review days:** |
| **Will the student be attending any planned college trips or excursions during their course and do any arrangements need to be put in place for these?** |
| **Is the student in receipt of 16+ Bursary funding? If so, how is this funding being utilised?** |

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| **ATTENDANCE** |

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| **Attendance % for this school year:**  **If below 95%, what is the reason and what is being done to address this:** |

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| **EXCLUSIONS (since last PEP)** |

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| **Summary of any Exclusion(s)** | **Total No of Days** | **Any further Action / Information** |
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| **Attainment at Key Stage 4:** | | |
| **Subject** | **Qualification** | **Result** |
| Maths |  |  |
| English |  |  |
| Science |  |  |
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| Subjects I enjoy / don’t enjoy:   |  | | --- | | **Student’s comments on progress** |   Subjects I am good at / would like to improve in:  Any clubs or activities I would like to become involved in: |

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| **SECTION 3: TO BE COMPLETED DURING THE MEETING** |
| **Special Educational Needs & Disability (SEND)** |
| No SEND  Type & Level of SEND:  Does the young person have an Education Health Care Plan (EHCP)? Yes  No  If yes, who is the SEND Education Officer?  What are the main areas of difficulty as summarised in the EHCP and what support is in place to address these : |
| **Any other issues or difficulties which impact on learning** |
| Describe any other difficulties, including emotional, behavioral and attitude to learning, and what support is in place to address these: |

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| **CURRENT PROGRESS** |

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| **Course / Qualification** | **Expected current level** | **Actual current level** | **Tutor’s comments** |
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| **LEARNING TARGETS (short, medium & long term)** |

**Targets can include:**

* **Target grades**
* **Breaking these down into achievable aims, eg. the completion of a particular project or assignment**
* **Any wider aims or objectives which could impact on progress, eg. improvements in attendance or punctuality or a relevant activity outside college / training hours**
* **Targets should be Specific, Measurable, Attainable, Realistic (Relevant) and Time related**
* **Please also consider expected progression from current course**

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| **Previous PEP Targets** | **Progress** | **Any further Action / Information** |
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| **New Targets** | **Support required** | **Lead professional** | **Timescale** |
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| **Career / Progression Plans:**  Please note future career plans / aspiration for the YP |
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| **Record of meeting invitees:**  Name & signature Role Attended meeting? | | |
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Signed (on behalf of education setting:

Signed (Young person)

Signed (PA / Social Worker)

Date