**Additional Banding request Template 3 (Special Schools only)**

**Template 3**

**Request for Exceptional Special Needs Form (ESN 1 or 2)**

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| **Name of Young Person:**  |
| **Current School:**  |
| **Request date:****ESN being requested (1 or 2):** |
| **Current Banding: (only children banded at a Level 4 can ESN be requested)** |
| **Brief outline of issue / concern:** |
| **What has been tried to date:** |
| **What provision is currently in place:** |
| **Behaviour / incident log:** |
| **Evidence of interventions that limit school resources:** |
| **Overview from the SEND Officer:** |
| **Recommendation from the SEND Team Lead:** |
| **Feedback from the SDM:** |

**Approvals:**

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| **SDM Signature: Name: Date:**  |