



EDUCATION MY LIFE MATTERS
Admission Arrangements Policy

Approved by:	Independent Executive Board	Date: 15.05.23
Next review due by: April 2024		

EMLM is an Independent School which offers Alternative Provision support. At EMLM we believe and apply a **holistic** approach to our curriculum, ensuring equal access to learning to all and appropriate levels of challenge and support. Our ethos is one of empowering our Learners to make a fresh start and develop their confidence to meet their individual needs in order to prepare for re-integration back to their secondary mainstream or continue with EMLM and develop social, independent skills and gain qualifications relevant to their next steps. We recognise our duty to embrace diversity and to work to overcome prejudice. We do not discriminate on grounds of diversity, gender, gender reassignment, pregnancy, disability, sexual orientation, race or religion.

Admissions Procedures:

Our admissions are received directly from schools, parents, and Local Education Authorities (LEA) via a referral form (Appendix 1). The referral form asks for comments on academic progress to date, areas of improvement required and general behaviour standards. This information allows EMLM to assess whether it is the right school for each Learner and to tailor our approach to meet the specific needs of each individual referral.

We accept referrals throughout the year. We are also happy to have telephone consultations with schools, LEAs and parents once the referral has been received. This helps us to build a relationship with the referring body and is an opportunity to obtain in-depth background on the Learner to enable EMLM to identify what support is required and when.

EMLM makes direct contact once the initial referral form and/or risk assessment is received. We endeavour to make contact on the day the referral is received (within 24-48 hours) to arrange an induction meeting with the learner and their parent/carer, schools, and any other professional working with the family.

At the induction meeting it is made clear to all prospective learners and their parents/carers that EMLM will work in partnership with them. This partnership is based upon mutual honesty and respect. Information is gathered/shared (Appendix 2) regarding any identified need, medical condition or disability which could require specialist treatment, support or equipment and any behavioural or disciplinary issues known at the point of admission. This full disclosure is essential to assist with any pre-assessment or Outreach support which may be necessary, as well as ensuring Individual Healthcare Plans and/or risk assessments which can be put into place where necessary.

Placements at EMLM are offered to Learners who we can safeguard and support and where EMLM feels they will be able to either accept the learner long term or be able to work with them to re-integrate them back to their secondary placement.

All learners joining EMLM must agree to abide by the code of conduct and to adhere to relevant school rules and policies.



Independent School and Alternative Provision Learner Referral

Please complete all sections in full

Please email to info@emlm.org.uk

Learner Referral Form

Section 1

Young Person Details

First Name:	Surname:
Preferred Name/Known As (if different):	
Date of Birth:	Age:
Male	Female:
Ethnicity:	Nationality:
Current school year: 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/>	

Referring School:	
Unique Pupil Number	
School Contact Details:	
Email:	
Home address:	
Email address:	
Home number:	Mobile number (if applicable):
Name of family/carer young person resides with:	
Relationship to the young person:	
Foster Carer:	
Guardian:	
Does this person have parental responsibility? <i>If no, please state Name and Address of person with PR, and status of legal status/care order of guardian named above</i>	Yes / No
Work number (if applicable):	Mobile number:

Section 2

Referral Source Details

Name of Referrer:
Address:

Admission Arrangements Policy: April 2023
Review date: April 2024

Name of key contact in Referral Agency:	
Position:	
Contact no:	Email:

Section 3

The Young Person – Risk Assessment details

Proposed start date:		
	Yes	No
Is this young person eligible for Free School Meals/Pupil Premium?		
Does this young person have an Education & Healthcare Plan? <i>Please attach EHCP:</i>		
Is this young person a Looked After Child? <i>Name of Virtual School Lead: Des Benjamin Under Section?</i>		
Has this young person been involved in incidents of violent behaviour or involving a weapon? <i>A risk assessment may be required.</i>		
Has this young person been involved in incidents of violent or sexualised behaviour/is at risk of CSE? <i>A risk assessment may be required.</i>		
Possible gang affiliation and/or known to Youth Offending Service? <i>A risk assessment may be required.</i>		
Please give reason and length of last Fixed Term Exclusion:		

Section 4

Reason for Referral

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	Yes	No

Section 5

The Young Person – Attainment

Attendance & Punctuality: Current Year:	Current Term:
Previous Year:	Previous Term:
Key Stage Information, where available:	
KS1:	KS2: KS3:
What grades is this young person expected to be achieved in GCSE Maths & English?	
Maths:	English:
Please list any other qualifications studied, including those completed but not achieved and/or those awaiting results:	
Qualification:	Grade:

Section 6

Team Around the Young Person

Does the young person have any other workers allocated to them from other agencies?			
If yes please give details:			
Name and type of agency	Name and position of key contact(s)	Telephone number(s) and email of key contact(s)	Nature of engagement/ support

Section 7

Barriers/Risks/Vulnerability Factors

Please provide key information about the young person’s circumstances in the following areas, as it relates to their personal safety and wellbeing, personal conduct, and likely ability to achieve and sustain education, employment or training in the future:

Learning	
1.	
2.	
3.	
Behaviour	
1.	
2.	
3.	
4.	

Wellbeing	
1.	
2.	
3.	

Signature

The information provided in this form is accurate to the best of my knowledge. I understand that the information that I am providing is being collected under the Data Protection Act 1998 (update with GDPR details) and is subject to all the provisions of that Act.

Signed:.....

Position:

Name.....

Date

Your Key Contacts at EMLM		

Appendix 2: information gathering form EMLM

Information gathering for prospective/new Learner

Discussion between: <i>Name of EMLM staff member and prospective school member</i>		Date: Subsequent conversations:	
Full name of Learner:		SEND/Safeguarding needs: Medical Care plans/needs:	
Placement: Short term/Long term			
Academic information:			
Current reading age:		Comprehension age:	
Spelling age:			
Maths level:		Writing Level:	
		Science Level:	

Discussion	Any follow up actions By whom? By when?
What are the needs of this Learner: <i>Academic needs and personal</i> <i>Likes/dislikes</i> <i>What does/doesn't work for this learner</i> <i>Any suspensions? How many? What period?</i>	
Reason for placement - if not already discussed above:	
Any risk assessments in place or need to be carried out:	
Involvement Social Services/Police: Who? Where? Contact names etc Any court orders etc	
EHC Plan? Discuss Progress/Annual reviews and dates for this and next meeting	
Family/Carer involvement: <i>What are school/family relationships?</i>	

<i>Who has Parental responsibility?</i>	
What planning will current school provide (if short-term placement)	
Who is the named contact person from the school to liaise with re any issues?	
Will school staff member support with transition?	
Can school/EMLM/Learner and family have meeting together?	