## Children Missing from Education (CME) Referral (SR1a)



## **Referrer Details Referral Date:** School/Name of person making referral: Contact no.: **Pupil Name:** Alias: Date of Birth (dd/mm/yyyy): Gender: Female Male Last known school, including DFE number if known: Last date in school: If removed from roll prior to referral give date and reason: Details of the case INCLUDING any safeguarding concerns:

## Searches carried out by referrer

	Date(s)	Response
If child is on CP register, notify the Social Worker.		
Check possible whereabouts with staff and pupils.		
Contact any known extended family and/or emergency contact numbers.		
Contact siblings' schools if different.		
Has school written to parents?		
Check with Admissions.		
Visit last known address. Check with neighbours.		
Check with agencies with known involvement e.g. Social Care, Health (school nurse), MAT, Youth Offending Service.		
Any additional information on searc	ches:	

## **Family Information**

Siblings if known:	
Ethnic origin:	
<b></b>	
Pupil Address ( ☐ please tick if missing from this address):	
Postcode:	
Parent/Carer Surname:	
Parent/Carer Forename:	
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Title:	
Relationship:	
Parent/Carer Phone (1):	
Parent/Carer Phone (2):	
Parent/Carer Address (only complete if different from pupil's address):	
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**Restricted upon Completion** 

Second Parent/Carer Surname:		
Second Parent/Car	rer Forename:	
Title:	_	
Relationship:		
Second Parent/Ca	rer Phone (1):	
Second Parent/Ca	rer Phone (2):	

Referral Information	
☐ Child has a CAF	
☐ Child has a Child Protection Plan	
☐ Safeguarding concerns?	
☐ Social Worker alerted	
☐ Traveller	
☐ Child has an EHCP	
Name and contact number of a child/family	ny other professionals involved with the
Social Worker	
DCC Early Help Practitioner	
SEN Case Worker	
Any other professionals that are involved with the child	

Updated 1.6.22