

**Early Years**

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| --- | --- | --- |
| School/Setting |  | |
| Address |  | |
| Name of contact |  | |
| Role/Job title |  | |
| Email |  | |
| Telephone number |  | |
| **Support required (please select all that apply):**  □ Inclusion audits  □ EYFS practice and provision support and advice  □ Ofsted readiness | | |
| **Package required (please select as appropriate – see Service Directory)**  □ Half day package (3 hours)  □ Full day package (6 hours)  **NB:** support is tailored to each school/setting and content delivery will be best matched to the time package requested. | | |
| Signature of person commissioning support: | | Name (in capitals): |
| Position: | | Date: |
| ***Please return completed referral forms via:***  **Worcestershire County Council Children’s Services Portal** – select named individual – TERESA HAMILTON  ***OR***  ***EGRESS –*** *schoolsupportsevices@chadsgrove.worcs.sch.uk* | | |
| **Chadsgrove School Support Services**  Meadow Road  Catshill, Bromsgrove  Worcestershire, B61 0JL  **Tel:** 01527 871511 (option 2)  **Email:** [schoolsupportservices@chadsgrove.worcs.sch.uk](mailto:schoolsupportservices@chadsgrove.worcs.sch.uk)  **Website:** [https://www.chadsgroveschool.org.uk](https://www.chadsgroveschool.org.uk/web/school_support_services)  @chadsupportteam | | |