|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Child** |  | **Date of Birth** |  |
| **Name of Current Setting** |  | **NC Year Group** |  |
| **Please describe the reasons for this request and how the HNTUF will be used to increase access to the curriculum, learning environment and to support the CYP in achieving their outcomes** | Reason/s for the request:How the HNTUF will be used to increase access to the curriculum, learning environment and to support the CYP in achieving their outcomes: |
| **Is the child attending on a full-time timetable** | YES / NO | **Have you discussed this funding request with parents/carers?*****(requests that have not been discussed with parents/carers cannot be considered)*** | YES / NO |
| **Attendance details** (% authorised and unauthorised this academic year to date)*Only CYP attending full-time or close to full time will be considered* |  |  |  |
| **Reviewed SEN Support Plan with signed parental consent (signed within last 6 weeks) is attached to this application** | YES / NO | **School is at their identified ‘trigger point’ for making a request, or is a small infant school with a trigger point of 3 of less** | YES / NO |
| **Where applicable, include an overview of current HNTUF being received, for how many pupils and how this is being utilised**  | Overview of current HNTUF (e.g. how much, when is this due to end?):How many pupils receive HNTUF (including group funding):How is the funding being utilised:  |
| **Where applicable, reports from relevant professionals that support or recommend the provision to be in place** | YES / NO / NA |  |  |
| **Number of hours funding being requested per week?** |  | **Date the additional supporting staff member due to be in place from?** |  |
| **Start and end date provision is to be in place from and until** (typically maximum of 2 terms will be considered)  | Start date: End date:  |
| **Timetable attached which notes the following:*** the additional hours of support in place or the provision that is to be in place
* Provision on the timetable is specific (what, by whom, staff to child ratio, location), matched to identified needs and based on evidence-based approaches
* Provision on the timetable matches the number of hours funding being requested

*(Requests cannot be considered without this information)* | YES / NO |

|  |  |
| --- | --- |
| **Name of Applicant**  |  |
| **Signature**  |  |
| **Role** |  |
| **Contact Telephone Number** |  |
| **Contact email**  |  |
| **Date form submitted**  |  |

***Please also read MKC Top-up Funding Guidelines:*** [***Support in school | Milton Keynes City Council (mksendlocaloffer.co.uk)***](https://www.mksendlocaloffer.co.uk/education-and-send/support-school)

The SEND Inclusion Forum meets weekly and top-up funding requests will be considered during term time only. Each application is discussed to determine whether the CYP meets the high needs criteria;

There are three types of decisions:

* The CYP meets the criteria for high needs funding
* The CYP does not meet the criteria for high needs funding
* The CYP meets the criteria for high needs funding, however, an adjusted amount has been agreed due to the information provided

Completed applications can be submitted at any time and will be considered in date order, at the closest forum meeting date with capacity.

Please note that applications must be checked and prepared and that forum members require at least 5 working days to review applications prior to the forum meeting. Applications submitted close to a forum date will therefore be submitted to the following week’s forum. All requests will be considered at the SEND Inclusion Forum by a minimum of 3 SEND Team senior representatives.

The agreed amount for high needs top-up funding for the financial year 2023-24 is amount of £12.90 per hour. School remains responsible for the first 12.85 hours (£6,000).

Please note that if the application is not complete, funding will not be considered and the form will be returned advising of this.