

REQUEST FOR AE SUPPORT FORM

Auckland City Education Services Mount Albert Grammar School Alberton Ave, Mt Albert, Auckland, 1025 Phone: (09) 302 0426 Web: www.aces.school.nz Email: enrolment@aces.school.nz

Reason for referral	or	□ Early Intervention □ Behaviour Concerd □ Excluded □ Non-enrolled □ Whānau Request				าร					Date of refe	erral:	
Referral Person:									Email:				
Organisa	tion:								Position				
Phone:						EXT:			Mobile Phone	e :			
Enrolling (or last e			hoo	1)	• Du	ıal Enrolr	ment (St	tudent v	vill stay enrolled	d with	current scho	ool)	
Student's	s Nam	е:							School Yr:		NSN:		
Preferred	l Nam	e:							Gender:				
Date of B	Birth:								Ethnicity/s:				
lwi / Hapı	u:								Village Affilia	tions	:		
Residenc Citizensh	y or nip	,	Yes		No				Language(s) home	at			
Address:													
Parent / C	Caregi	ver ′	1			Parent /	/ Caregi	iver 2			Emerger	псу Со	ntact
Name:						Name:					Name:		
Relations	ship:					Relatio	nship:				Relation	ship:	
Lives with Student	h					Lives w Studen					Lives wi Student		
Occupati	on:					Occupa	tion:				Occupat	tion:	
Phone:						Phone:					Phone:		
Email:		_				Email:					Email:		

ĀKONGA / WHĀNAU / FAMILY AGREED TO A REQUEST FOR SUPPORT

Whānau / Family agreed for information can be shared to support Collaboration Action Plan
YES

Ākonga (student) has agreed to a Request for Support

YES

NO NO

Request for Support

(You can Tick More than One Box)

- Attendance Service Attached (Unjustified Absentees) or Non Enrolled
- Emotional Regulation and includes Wellbeing Needs
- Learning Levels below chronological age
- Neurodiversity Needs

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- Disengaged from learning and refusing to attend a school setting
- Large school environment impacting on engagement
- $\hfill \square$ Several incidences leading to multiply detentions that are not being completed
- □ Has had Stand-Downs this year and likely to end up being suspended
- Risky behaviour in school and/or outside school setting
- Managed Moves Attached
- □ Several professionals attached and includes either Educational Services, Police, Oranga Tamariki or Health

Data Needed To Support Collaboration Action Plan

(School and /or MoE requesting support please attach the data to your Request for Support)

- Attendance Records
- Literacy / Numeracy Assessment Details
- Pastoral Care Reports and most recent School Report
- Assisted Learning Support Details
- RTLB (or MoE Learning Support) Individual Education Plan

For School or, MoE Referring Person to Complete

IRF (INTERIM RESPONSE FUND) Has IRF been applied for? YES NO Enrolling School can apply for IRF to support ākonga transition into ACES AE? (MAGS will invoice the School for AE to access to utilise IRF funding) NO

RTLB and/or MoE Learning Support		
Has a referral to a RTLB person been made?	YES	NO
Has a referral been made to MoE Learning Support?	YES	NO
Is there MoE Learning Support funding attached to the student for a Teacher Aide?	YES	NO
Can ACES AE access funding attached to the student for a Teacher Aide? (MAGS will invoice the School for AE to access to set in place TA support)	YES	NO

Key Person Contact Details

Support Services currently involved (e.g. Health, OT, Police, Youth Aide, Mentor)

Name:	Agency:	
Email:	Phone:	
Name:	Agency:	
Email:	Phone:	
Name:	Agency:	
Email:	Phone:	
Name:	Agency:	
Name: Email:	Agency: Phone:	
Email:	Phone:	
Email:	Phone: Agency:	
Email: Name: Email:	Phone: Agency: Phone:	