



## CHECKLIST for HHTS APPLICATION

Referral checklist, for those wishing to refer a child to the Hospital & Home Tuition Service. In order for us to process your referral as quickly as possible, please ensure that the following evidence accompanies the completed Early Help Assessment Form. Incomplete referrals will be returned to the sender.

	<b>Tick attached</b>
<b>Early Help Assessment Form (last 3 reviews)</b>	
<b>Supporting Medical Evidence</b>	
<b>Medical Tuition Support Service form - Please note this supersedes the HHTS1.</b>	
<b>Evidence of School Support - what the school has done prior to the referral</b>	
<b>Attendance Data - this should include reasons for absence ie. cold, refusing to attend, sickness, etc.</b>	
<b>Any other relevant information</b>	

Please attach this checklist to the referral before emailing.

Thank you