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| **EHC Plan Personal Budget Request Form** | |
| Name of child/ young person: | Address: |
| Date of Birth: |
| Educational setting which child/young person attends: |
| This request is made for: | A new EHC Plan  Following an Annual Review of the EHC Plan |
| Name and contact details of the person completing this form: | Relationship to child/ young person: |
| Please use the section below to indicate which section of your child/ young person EHC Plan you are requesting a Personal Budget for.  Please add more rows or submit attachments if there is not enough space on this document | |
| Please attach any reports you are quoting which are not currently in your child/ young person EHC Plan.  Need (section B)  Outcome (section E)  Provision (Section F) or professional report: | Please provide the Local Authority with a minimum of 2 quotes, the providers, and their contact details.  Costs/ quotes: |
| Please describe how the allocation of a personal budget would be used to support success for the child/ young person: | |
| Need (section B)  Outcome (section E)  Provision (Section F) | Costs/ quotes: |
| Please describe how the allocation of a personal budget would be used to support success for the child/ young person: | |
| Need (section B)  Outcome (section E)  Provision (Section F) | Costs/ quotes: |
| Please describe how the allocation of a personal budget would be used to support success for the child/ young person: | |
| Are any of the proposed arrangements to be met within the educational setting? | Yes  No |
| If yes, has this been discussed with the educational setting. Head Teacher?  If so, please provide further details. |  |
| If request is successful, I would like my personal budget to be managed by: | Direct payment to parent/ young person (please delete as relevant)  Direct payment managed by a third party  I would like to discuss my options further |
| I understand that in order to process this request Brent Council will need to access my child’s/ young person’s EHC Plan, associated papers and may need to make enquiries of relevant professionals across agencies to obtain information and seek approvals before a personal budget request can be considered. | Signature:  Date: |

Please return this form to your child’s/ young person’s allocated case officer.

For support and further information:

Brent Special Educational Needs and Disability Information Advice and Support Service (SENDIASS)

Brent SENDIASS

Brent Civic Centre

Engineers Way

Wembley

HA9 0FJ

Phone: 0208 937 3434

Email: [sendias@brent.gov.uk](mailto:sendias@brent.gov.uk)

Brent Parent Carer Forum (BPCF)

Phone: 07305 145 167

Email: admin@brentpcf.org

[Brent’s Local Offer Page](mailto:https://www.brent.gov.uk/children-young-people-and-families/send-local-offer/send-money-and-benefits%23personalbudgets) provides further information on Personal Budgets

Useful document: [Making it personal. A family guide to Personalisation, Personal Budgets and Education, Health, and Care Plans](mailto:https://www.kids.org.uk/Handlers/Download.ashx?IDMF=065d0235-1e37-46b9-8951-8252a02843c6)