

# Personal Education Plan

Brighton and Hove Virtual School



Child:	Name:	DOB:
School/Setting:	Name:	Year Group (if applicable):
Parent/Guardian:	Name:  Email:	
Date of Completion:		
	Yes	No
Is the child making expected progress overall?	<input type="checkbox"/>	<input type="checkbox"/>
Is the child at age related expectations overall?	<input type="checkbox"/>	<input type="checkbox"/>
If "No" to either question then what is in place to support the child?		
Other Issues: (e.g. Health, Emotional, Behavioral, Attendance, Plan)		

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Target (What outcome are you trying to achieve)	How will this be done? (Exactly- what actions will be required/what support is needed)	Who?	Start and finish	Pupil Premium Spend (£300 or £1900)	How will we know it is achieved