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Pupil Talk Time Check in

Date		Start time		End time	
Check in Location					
Pupil name and class teacher					
Referred by <i>Pupil self referral, Teacher, Parent. SLT?</i>					
Reason for check in <i>Why does the pupil need a check in? How are they feeling? How big do they think their problem is?</i>					
Action <i>What needs doing? What can you put in place? By whom? By when?</i>					
Pupil Response <i>Pupil comments, feelings etc?</i>					
Useful Resources <i>Resources that might help?</i>					
Further support <i>Does the pupil need other support e.g. (safeguarding) or do you have suggestions for the teacher or parent? Do they need further sessions? Makes notes if appropriate</i>	DSL	ELSA List for sessions	Parent	Teacher	Other
	Notes -				
Pupil follow up (if needed) <i>Date, time and location</i>					