



TOWN CLOSE SCHOOL

NORWICH'S FINEST PREP SCHOOL • FOR GIRLS & BOYS • 3-13 YEARS

LEARNING SUPPORT DEPARTMENT.

APPENDIX B

Identification of Concern

To be completed by the class teacher for a
child in years 1-8.

Name of pupil:

Class:

When was concern identified?

By whom?

Areas of concern: (continue on separate sheet if necessary)

iSAMs DATA

<u>TEST</u>	<u>Date</u>	<u>Score</u>
Most recent NVR		
Most recent VR		
Suffolk Reading		
SWST		
Any other subject assessment		

Strategies and resources currently in place (seating arrangements, behaviour management strategies, literacy/maths groupings etc)	How successful were these?

Are parents aware of your concern? (Please attach comments and outcome of discussions)

Pupil's view of their difficulties:
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When this form has been completed, please give it to Francesca Rymarz or email it to frymarz@townclose.com