

## All About Me

### Child/Young person and family contribution to the assessment request for an education, health care needs assessment

#### The Purpose of the document

The 'All About Me' document provides an opportunity for the child/young person and their family to tell their story. The document enables the child/young person and their family to describe:

- their strengths and needs and current levels of support
- what is working well and what is not working so well
- their hopes and aspirations for the future

The document can be completed by the child/young person with help from their parent(s)/carer(s) or Learning Support Assistant if this is preferred.

Please see attached guidelines to help complete your contribution to the EHC needs assessment. You may change the order, leave bits out or add things you may feel to be important.

We should find it helpful, however, if you used the headings we have suggested. Your written contribution may be as short or as long as you wish.

The form can be completed either electronically or it can be hand-written.

An electronic version of the form can be requested by emailing: [senassessment.reviewservice@harrow.gov.uk](mailto:senassessment.reviewservice@harrow.gov.uk)

## PERSONAL DETAILS

<b>Surname:</b>	
<b>First name:</b>	
<b>Date of birth:</b>	

<b>Address:</b>		
<b>Telephone numbers:</b>	Home:	Mobile:
<b>Email Address:</b>		

## PROFILE

### ***What are my strengths***

*(for eg What people like and admire about me, What is working for me)*

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### ***Areas I would like to develop in***

*(for eg What I would like to improve)*

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### ***How I spend my leisure time***

*(for eg Hobbies and interests)*

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### ***What is important to me and for me?***

*(for eg independence, confidence in ... , )*

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**Other things I'd like you to know about me**

*(for eg ideas for the future)*

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**If an EHC plan is agreed, would you like to find out about personal budgets?**

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**Any other information**

*(for eg work experience, voluntary work)*

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**Parents/Carers contribution**

*(comments from parents/carers on the CYP's contribution to this profile and any further information that needs to be included)*

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**Did you complete this form by yourself? If no, please indicate who supported you**

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*You are signing this document to allow all organisations involved in contributing to the assessment to share your information in order to provide a comprehensive service.*

Signed: ..... (Young person)

Signed: ..... (Parent / Carer)

Date: .....

Thank you for taking the time to complete the 'All About Me' form.