



SEN Support - Action plan

Date:

My name is:

This is Me!

My DOB is:



I can:

-
-

I would like to:

-
-

This is what is important to me:

-
-

I can't do everything I like because:

-
-

My parents/carers think:

-

My key person thinks:

-

I receive help from:

-
-

I already have this help from my setting:

-

-

I would like to try this activity

-

When and where?

-

With whom?

-

With what?

-

The outcome should be:

-

I may also like to try to

-

When and where?

-

With whom?

-

With what?

-

The outcome should be:

-

My parents/carers will help me by:

-

We will look at my plan again on:

Action plan - Recording Sheet

Name of child:

Key person:

Planned objective:

Date:

Activity:

Outcomes:

Persons present:

Date:	Activity:	Outcomes:	Persons present:

Notes:

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Action plan - Review sheet

Name of child:

Date:

People present at this review:

Planned objectives:

Outcome (setting):

Outcome (home):

Next steps: