



## 09.13b SEN Support - Action plan

Date:

My name is:

This is Me!

My DOB is:

IMAGE OF CHILD

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:

Notes:

## Action plan - Review sheet

Name of child:

Date:

People present at this review:

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Planned objectives:

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Outcome (setting):

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Outcome (home):

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Next steps:

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