

Warwickshire County Council

Parent Carer contributions/request for Education Health and Care Needs Assessment (EHCNA) Guidance



Guidance for completing the request form

We've created this short guide to help you complete the request form with confidence. It explains what information is needed, how to fill in the required sections, and how to save, submit, and return to the form later if needed.

Why this form is important

- The information you provide will help the local authority to:
- Build a fuller understanding of your child or young person to support decision-making.
- Share relevant details with professionals (if a needs assessment is agreed) to support their work.
- Contribute to a support plan, where appropriate, in consultation with you as parent carers

Completing the form

- Mandatory fields are marked with an asterisk (*). These must be completed to progress the referral.
- Please include as much information as you feel comfortable sharing. The more detail you provide, the better we can understand and support your child.
- If any required information is missing, your request may be cancelled, and you may need to start a new referral.

Saving and returning to the form

- You don't need to complete the form all at once.
- To return and edit later, you must submit your referral first. Once submitted, you can go back and make changes if needed.
- This guide talks you through the required fields in your first sitting and how to save/submit and return to complete.



Before you Begin

The first part of the form gives you a brief overview of each section and outlines the types of information you'll be required to submit as part of your request.

To make the process smoother, we recommend gathering any relevant documents or details before you start. This will help you complete the form more easily and avoid delays.

Section 2

What will you need to complete the form

Questions:- All questions marked with a star * are mandatory and will need completing. All other questions are optional. Please include as much information as you feel comfortable sharing.

Section 4 - Personal information *

- e.g. Name, DOB, Address etc.

Section 5 - About the child/young person

- e.g. This includes reasons for request, how your child is now and any past experiences/challenges that have affected them.

Section 6- The child/young person and education

- e.g. This section includes questions about their education journey so far.

Section 7 - Any further information.

- This is your opportunity to share any further information you think is relevant to support the request and know where to send any evidence
-

Section 8 - Submitting the form

If you would prefer to talk to somebody over the phone or email or have any questions regarding any element of this form, please email sen@warwickshire.gov.uk, providing your name and contact information and indicate in the subject heading that it is regarding a parental contribution and someone will call get back to you as soon as possible.

What will you need to complete the form

Question - All questions are marked with a star* are mandatory and will need completing. All other questions are optional. Please include as much information as you feel comfortable sharing.

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First submission

When filling out the form, you'll be asked to complete all the questions in Section 4 that are marked with an asterisk (*). These are mandatory and help us gather key information about your child or young person. All other sections and questions are optional. Please feel free to share as much detail as you're comfortable with. The more detail you provide, the better we can understand and support your child.



Personal Information

The information in this section is used to identify the child/young person and the person completing this form and is required to progress the form.

1. First name of child/young person *

Enter your answer

2. Surname of child/young person *

Enter your answer

3. Date of Birth of child/young person *

Please input date (dd/MM/yyyy)

4. Please provide your name *

If you are completing this with the parent carer please provide their name.

Enter your answer

5. Please provide the email address of the parent carer *

Enter your answer

6. Please provide the contact phone number of the parent carer *

Enter your answer

7. What is your relationship to the child/young person? *

If you are completing this with the parent carer please provide their relationship.

Enter your answer

8. Is this contribution to support a School/Setting request or a parental request? *

☐ Parental request

☐ To support a school or setting request

9. Name of main parent *

This is the parent the child lives with for the majority of the week

Enter your answer

10. Contact email address for correspondence if different from one already provided

Enter your answer

11. Contact telephone number if different from one already provided

Enter your answer

12. Address *

Enter your answer

13. Does anyone else have parental responsibility? *

☐ Yes

☐ No

14. Do they live at the same address? *

☐ Yes

☐ No

First submission

As part of your first submission, you'll also need to complete the final section of the form. This section is important because it:

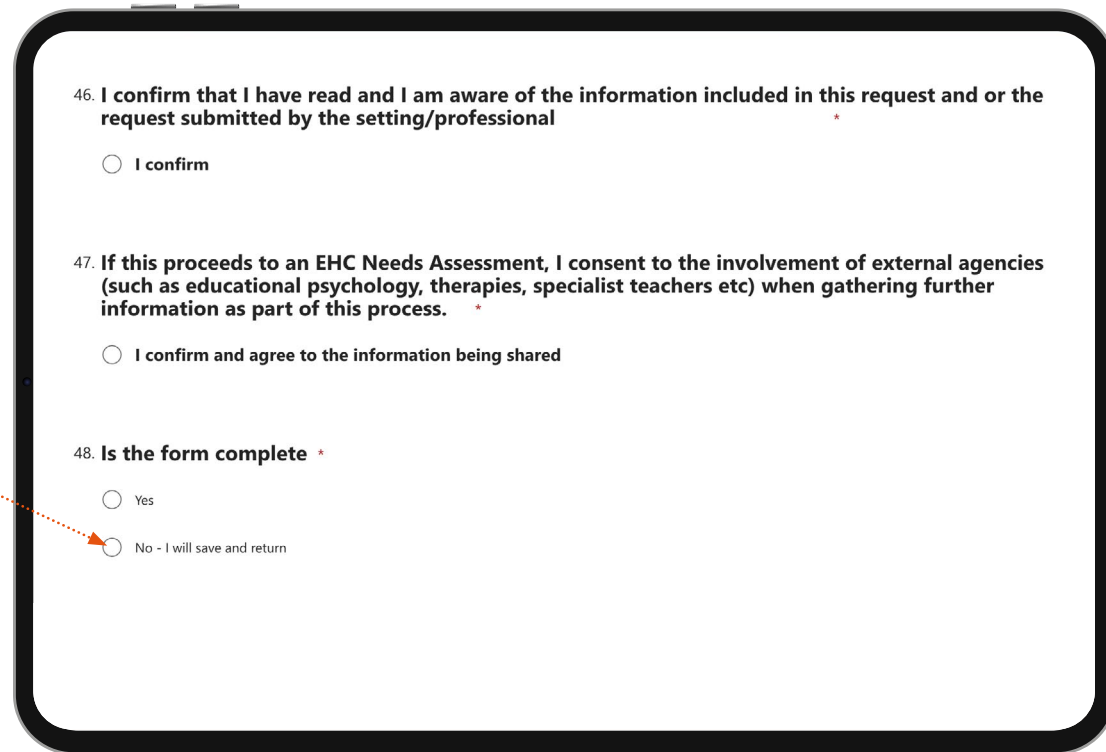
- Acts as a declaration confirming the accuracy of the information you've provided.
- Includes your agreement for the information to be shared with relevant agencies involved in the EHC Needs Assessment (EHCNA) process.
- Allows your submission to be saved, so you can return and edit the form later if needed.

We'll also ask you to let us know whether this is your final submission or if you plan to return and add more information. This helps us process your request as efficiently as possible.

If you are not completing the whole form in the first sitting, please ensure you select the **NO** option here

Once you hit submit you will receive this message: **Click on the box to save your response to edit.**

If you don't already have an account, it will ask you to create one (once created you will not need to do this in the future).



46. I confirm that I have read and I am aware of the information included in this request and or the request submitted by the setting/professional *

☐ I confirm

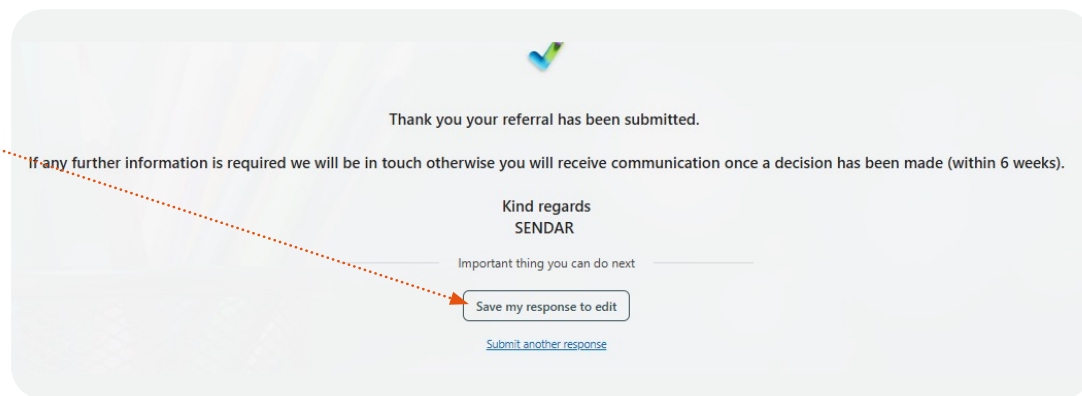
47. If this proceeds to an EHC Needs Assessment, I consent to the involvement of external agencies (such as educational psychology, therapies, specialist teachers etc) when gathering further information as part of this process. *

☐ I confirm and agree to the information being shared

48. Is the form complete *

☐ Yes

☒ No - I will save and return



Thank you your referral has been submitted.

If any further information is required we will be in touch otherwise you will receive communication once a decision has been made (within 6 weeks).

Kind regards
SENDAR

Important thing you can do next

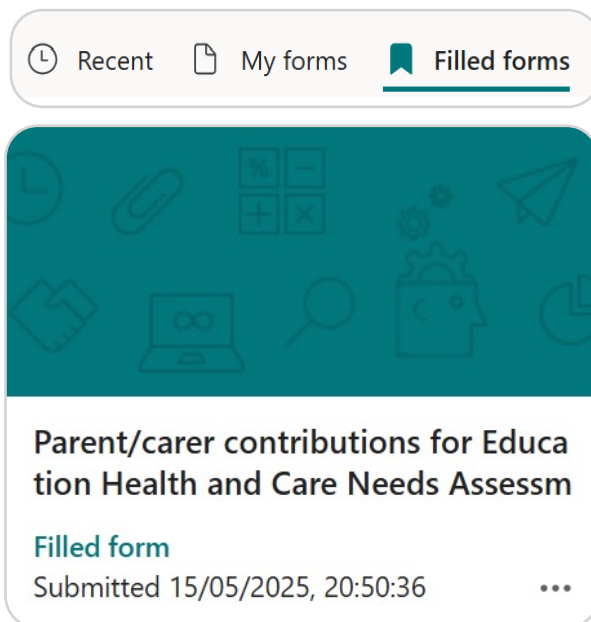
[Save my response to edit](#)

[Submit another response](#)



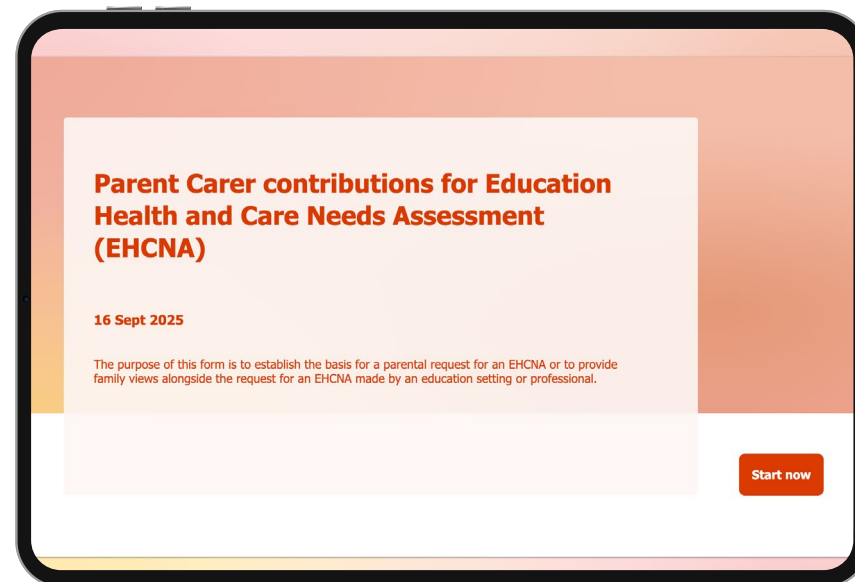
Returning to your request to continue with your submission

Step 1. Once logged in to Microsoft forms you will enter a home page like this click on filled forms and the submitted forms will show



The screenshot shows the Microsoft Forms interface. At the top, there are three tabs: 'Recent', 'My forms', and 'Filled forms', with 'Filled forms' being the active tab. Below the tabs is a teal header with various icons. The main content area displays a form titled 'Parent/carers contributions for Education Health and Care Needs Assessment'. Below the title, it says 'Filled form' and 'Submitted 15/05/2025, 20:50:36'. There is a three-dot menu icon to the right of the submission time.

Step 2. Click on the form you require, and you will then be able to view responses



The screenshot shows the form titled 'Parent Carer contributions for Education Health and Care Needs Assessment (EHCNA)'. The date '16 Sept 2025' is displayed. Below the date, there is a paragraph explaining the purpose of the form: 'The purpose of this form is to establish the basis for a parental request for an EHCNA or to provide family views alongside the request for an EHCNA made by an education setting or professional.' In the bottom right corner, there is a red button labeled 'Start now'.

Step 3. In the top right-hand corner, you will have a button that allows you to edit your responses

 **Edit response**

Please remember to select submit if you need to leave the form and return to ensure your changes are saved



Final submission

Once you have completed the whole form and are ready to submit your request you will be asked to provide a final few details and to confirm your submission.

Following the submission of this form you will receive an automated email with a reference number.

If you plan to send, or are sending, any additional documentation to support your request—such as diagnosis letters or professional reports—please send these to sen@warwickshire.gov.uk and include the reference number in your message. This helps us to link your documents to your request and process everything efficiently.

Should it be required, a word version of the form is available here however please only use this in extenuating circumstances.

If you have any queries or questions over elements of this form, please contact sen@warwickshire.gov.uk



How to save and return to your request

- You can submit your application and return at a later date to complete and edit your responses. **Please note you will need to complete all mandatory questions before you can submit.** Mandatory fields are marked with a *
- You will then be asked if you would like to save a copy to edit your responses at a later date, if you do not have an account (Microsoft) you will need to create one and once completed you can then return and edit your responses.
- Before final submission please ensure you have provided all the information you wish to and select response complete.
- If you would like to send any additional documents or evidence to support your contributions please email it to Sen@warwickshire.gov.uk including the child/young persons full name and date of birth.

45. Please confirm whether you will be sending any additional information/evidence as part of your submission. If, so, please send this to the following email address sen@warwickshire.gov.uk

☐ Yes I confirm

46. I confirm that I have read and I am aware of the information included in this request and or the request submitted by the setting/professional *

☐ I confirm

47. If this proceeds to an EHC Needs Assessment, I consent to the involvement of external agencies (such as educational psychology, therapies, specialist teachers etc) when gathering further information as part of this process. *

☐ I confirm and agree to the information being shared

48. Is the form complete *

☐ Yes

☐ No - I will save and return

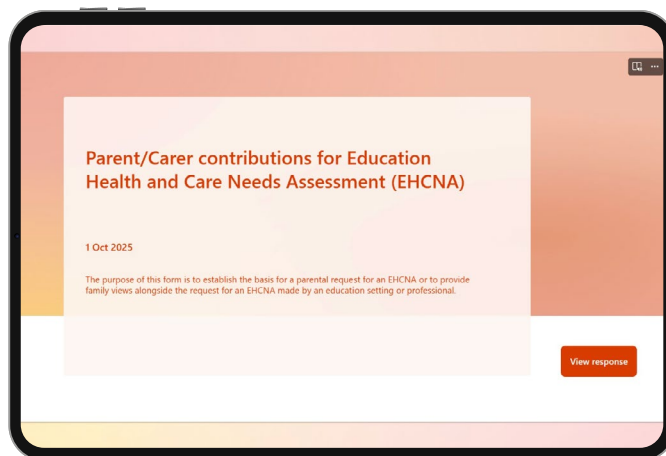
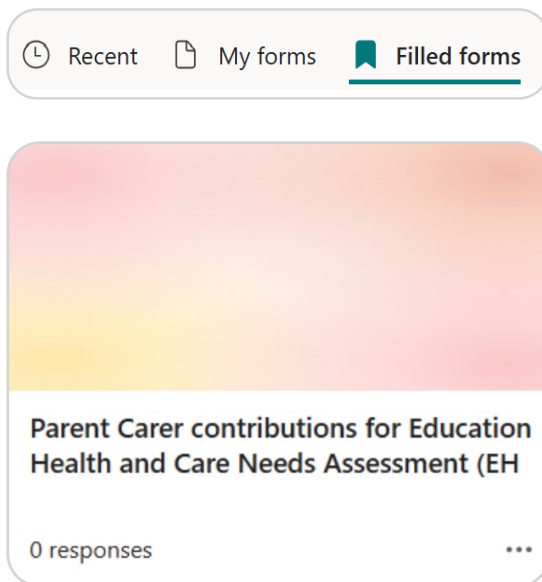
Please ensure you change the request to complete this lets us know that the submission is complete.

Saving your request as a PDF document

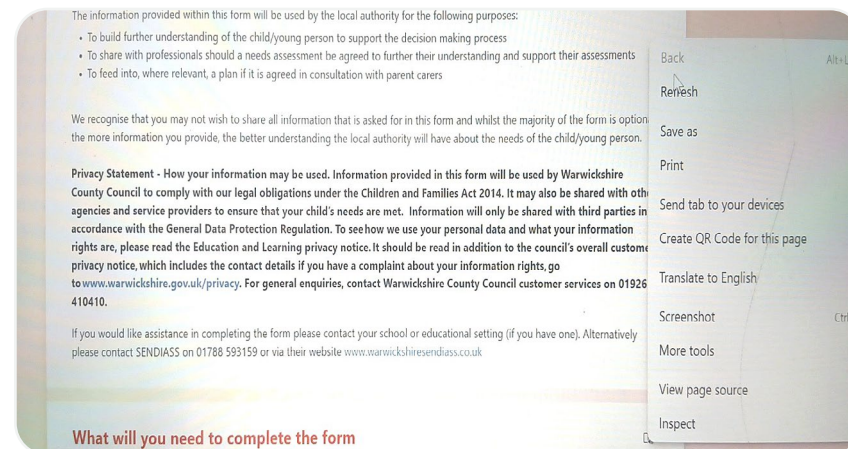
Step 1. Once you have completed your submission you can save your request as a PDF document, should you wish to.

To do this, to go your filled forms and click on the relevant form you want to save as a PDF.

Step 2. Click on the view responses tab at the bottom of the page.



Step 3. Right click on your mouse and it will give you an option to print.



Step 4. Where it says printer (left hand side of your page), it will give you a Save as PDF option in the drop-down filter. Save as PDF and then press save.

