**MODEL LETTER (4)** –

### Dear [Parent/Carer’s Name]

I regret to inform you of my decision to permanently exclude **[Child's Name]** with effect from **[Date]**. This means **[Child's Name]** will not be allowed in school unless **he/she** is reinstated by the governing body/the discipline committee **(management committee in case of a PRU)** or by an appeal panel.

 I realise this exclusion may well be upsetting for you and your family, but the decision to permanently exclude **your child** has not been taken lightly. **[Child's Name]** has been excluded because **[Reason for Exclusion]**.

### [For pupils of compulsory school age - next 3 paragraphs]

You have a duty to ensure your child is not present in a public place in school hours during the first 5 school days of this exclusion, in this case **[Specify the precise dates]** inclusive unless there is reasonable justification. You could be prosecuted or receive a penalty notice if your child is present in a public place during school hours on those dates. It will be for you to show reasonable justification.

 Alternative arrangements for **your child**’s education to continue will be made. For the first five school days of the exclusion, we will set work for **your child** and would ask you to ensure this work is completed and returned promptly to school for marking **[This may be different if supervised education is being provided earlier than the sixth day]**.

From the sixth school day of the exclusion onwards –

i.e., from **[Specify the date]** the London Borough of Hillingdon will provide suitable full-time education. You will be notified in writing of day 6 provision by the Local Authority shortly. You can contact them directly at: exclusionsupport@hillingdon.gov.uk

 **[Where pupil lives in a Local Authority other than the excluding school's Local Authority]** I have also today informed **[Name of Officer]** at **[name of local authority]** of your child’s exclusion and they will be in touch with you about arrangements for **his/her** education from the sixth school day of exclusion. You can contact them at **[give contact details]**.

As this is a permanent exclusion the governing body **(or management committee in case of a PRU)** must meet to review my decision to exclude **your child**. At the review meeting you may make representations to the governing body/PRU management committee if you wish and ask them to reinstate your child in school. The **governing body/PRU management committee** have the power to reinstate your child immediately or from a specified date, or, alternatively, they have the power to uphold the exclusion in which case you may apply for their decision to be reviewed by an Independent Review Panel. The latest date on which the **governing body/PRU management committee** must meet is **[Specify the date - the 15th school day after the date on which the governing body/PRU management committee was notified of the exclusion]**.

 If you wish to make representations to the governing body/PRU management committee and wish to be accompanied by a friend or representative please contact **[Name of Contact]** on/at **[Contact Details - Address, Phone Number, Email]** as soon as possible. You will, whether you choose to make representations or not, be notified by the Clerk to the **governing body/PRU management committee** of the time, date and location of the meeting. Please let us know if you have a disability or special needs which would affect your ability to attend the meeting. Also, please inform **[Contact]** if it would be helpful for you to have an interpreter present at the meeting.

**[As [child’s name] has a social worker, the social worker will also be invited to attend the meeting.] [As [child’s name] is a Child Looked After, the**

**Head of the [Local Authority Name] Virtual School will also be invited to attend the meeting.]**

You should also be aware that if you think discrimination has occurred under the Equalities Act 2010 in relation to this suspension, you have the right to make a claim to the First-tier Tribunal (for disability discrimination) or a County Court (for other forms of discrimination). The address to which claims should be sent is 1st Floor, Darlington Magistrates Court, Parkgate, Darlington DL1 1RU, e-mail send@justice.gov.uk. Your claim must be lodged within 6 months of the date of the exclusion. You may access further information on the following link www.justice.gov.uk/tribunals/send/appeals.

You also have the right to see a copy of **your child**’s school record. Due to confidentiality restrictions, you must notify me in writing if you wish to be supplied with a copy of **[Name of Child]**’s school record. I will be happy to supply you with a copy if you request it. There may be a charge for photocopying.

 You may also wish to contact the Exclusion and Reintegration team at the

London Borough of Hillingdon via e-mail at exclusionsupport@hillingdon.gov.uk, who will be able to provide advice on what options are available to you.

You may find it useful to contact Coram Children’s Legal Centre. They provide free legal advice and information to parents on education matters: [www.childrenslegalcentre.com.](http://www.childrenslegalcentre.com/)

Statutory guidance on Permanent Exclusions can be accessed on the following link [www.gov.uk/government/publications/school-exclusion](https://www.gov.uk/government/publications/school-exclusion)

**Yours sincerely**

### **[Name]**

### Headteacher (teacher in charge in case of an AP)

**[Cc. Social Worker – if the child has one**

**Virtual School Head – If pupil is Looked After**

**Other relevant professionals]**