|  |  |
| --- | --- |
| Name of School |  |
| Full Postal Address |  |
| Name of Headteacher |  |
| Name of contact and email address |  |
| Contact Telephone number |  |
| Local Authority |  |
| Number on Roll |  |
| Percentage of Free School Meal Pupils |  |
| Percentage of SEN Pupils |  |

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| DETAILS OF THE REQUEST |
| Please provide a few details about the school? i.e. leadership team capacity, recent Ofsted grade, current priorities.  |  |
| Would you specifically like SLE support? | [ ] yes, only SLE support – please complete section 1.[ ] no, - please complete section 2 |
| **SECTION 1****Note our current SLEs available for deployment:** Please tick the subject / area you would like support in from an SLE | **Primary** |
| [ ] English | [ ] Special Educational Needs and Disabilities |
| [ ] Phonics | [ ] Maths |
| **SECTION 2**What support do you need? Provide as much information as possible to enable Empower to identify how best to resource this. |  |
| No of days support requested in total:  |  |
| Frequency of support required: e.g. 1 day per week for 10 weeks, 1 day per month for a term, a block of support |  |
| *When would you like the support to begin? Or what term would you like the support in? e.g. Autumn, Spring, Summer* |  |
| Would you describe the need for support as urgent? |  |

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| Quote for the Support |
| *NLE day rate is £500**SLE day rate is £300 - £400**TA / HLTA day rate is £100 - £200**Assistant to the Educational Psychologist day rate is £150 - £200**Educational Psychologist day rate is £450 - £500* |

**Terms and conditions**

*The Client School will:*

* Enable access by the System Leader(s) to the school for the provision of the agreed services;
* Make reasonable endeavours to support the System Leader(s) in the delivery of the agreed services throughout the term of this agreement, including to respond in a timely manner to requests for information or specific assistance, and not doing anything which may undermine the reputation or work of the System Leader(s);
* Inform their Empower contact should it be necessary to make changes to the agreed Deployment Action Plan;

*KYRA Teaching School Alliance and its representatives will:*

* Ensure that the services are provided with all due diligence in accordance with reasonable professional standards so that the requirements of this agreement are met, in all material respects, to the reasonable satisfaction of the Client School;
* Provide, in consultation with the Client School, a Deployment Action Plan and a Deployment Report;
* Inform the Client School, as soon as is practically possible, if a System Leader is unable to fulfill a prior arrangement (e.g. in cases of sickness absence) and ensure that the appropriate arrangements are made so that the agreed services may be delivered;
* Act appropriately, and in a timely manner, to concerns raised by the Client school in respect of the services, or those delivering the services.

*Confidentiality*

All parties will keep confidential all information relating to the provisions of this agreement and to the business affairs of the other parties whether such information is received orally or in writing or by any other means and shall not, without the prior written consent of the other parties, disclose such information to any third party except as may be required by applicable law or regulation or by the rules or requirements of any regulatory authority.

***Support agreed [ ]***

***Teaching School: Signed …………………………………… Date ……………………..***

***Headteacher of Client School: Signed …………………………………… Date ……………………..***