

Hounslow Elective Home Education

Education Outline Plan

Name of child/young person:.....

Do you consider that your child has any special needs (medical, physical, learning)?

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.....

Do you consider your child to have any particular gifts or talents?

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How are you planning to make sure your child is taught a wide range of subjects to provide him/her with a broad and balanced education?

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Will you have any help from another person or from any equipment? If so, please state what this will be:

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How will you decide whether you are being successful in teaching your child?

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Which extra-curricular activities will your child be involved in?

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Signed Date