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| **Name:** | XXXX | | | **Entry Date** | September 2020 |
| **XXXX School contact** | | Classteacher@XXXXschool.ac.uk | | | |
| **Transition start date** | | |  | | |

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| **Information for transition** |
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| **Overview of Student** |
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| **Measurable Targets** | |
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| **EHCP Outcomes for end of school and entry into college** | |
| **Outcome** | **Evidence if seen through transition** |
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| **Transition Visit Schedule** | | |
| **Date & Time** | **Staff Supporting** | **Outcome of Visit** |
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