**NOTIFICATION OF NEW PLACEMENT**

**OF A LOOKED AFTER CHILD IN BOLTON**

1. Child’s or Young Person’s Full name and AKA Click here to enter text.
2. Date of Birth Click here to enter a date.
3. Gender: Male ☐ Female [ ]
4. Placing Authority Click here to enter text.
5. Social Worker Name Click here to enter text.
6. Social Worker Phone Number Click here to enter text.
7. Social Worker Email Click here to enter text.
8. Emergency Details of Home Authority Click here to enter text.
9. IRO Details Click here to enter text.
10. Legal Status of Child/ Young Person Click here to enter text.
11. Date Placement Starts Click here to enter a date.
12. Carer/ Institution Type (foster carer, children’s home or other)
13. What has the carer been contracted to provide? Any specialist provision?
14. Carer Name Click here to enter text.
15. Carer Address Click here to enter text.
16. Carer Telephone Click here to enter text.
17. Any particular needs or risks to the child. E.g. SEN, disability, youth offending, mental health needs, at risk of CSE etc. Click here to enter text.
18. Please attach a copy of the care plan to highlight needs
19. Old school name and address Click here to enter text.
20. Planned new school name and address (if known) Click here to enter text.
21. Former GP name and address Click here to enter text.
22. Planned new GP name and address if known Click here to enter text.
23. Name of DCS or Nominated Officer approving the placement Click here to enter text.
24. Date of approval by responsible authority Click here to enter a date.

Upon completion this form should be sent via secure email to lac.notifications@bolton.gov.uk