

**Identification of students intending to continue to attend Sun Academy Bradwell**

**(please delete Yes/No where appropriate)**

Name of child/children		
Class/Year Group		
Are you classed as a key worker under the current definition? (NHS workers, Police, school worker, supermarket delivery driver)	Yes  Name of employer:	No
If you believe you MAY work in a profession that will be identified in the full list of key workers, please provide the title of your role, and the name of your employer	Job title:	Employer:
Does your child have a social worker assigned to them?	Yes	No
Does your child have an Education Health and Care Plan (EHCP)?	Yes	No
If you have answered <b>YES</b> to any of the above, do you intend for your child to continue to attend the academy during this period of closure?	Yes	No
Is your child in receipt of Free School Meals?	Yes	No
Best contact number and email address to discuss the above if necessary	Telephone number:	Email:

Please be aware that proof of current employment may be required if you fall into a key worker category.

Any details relating to this will be communicated with the fuller list of key workers later today.