

***Anghenion Dysgu Ychwanegol***

***Ffurflen Cyfeirio Rhiant / Gofalwr Oed Ysgol***

**Additional Learning Needs**

**School Age Parent / Carer Referral Form**

*Mae'r ffurflen atgyfeirio yma i chi rannu gwybodaeth gyda'r ysgol a / neu'r Awdurdod Lleol os ydych yn meddwl y gallai fod gan eich plentyn gyda anghenion dysgu ychwanegol, a bod angen darpariaeth dysgu ychwanegol (DDY) arno/hi.*

*Bydd y ffurflen atgyfeirio yma yn cychwyn y broses o ystyried ADY gan yr ysgol neu’r Awdurdod Lleol. Gellir ddod o hyd i wybodaeth am y broses yma ar y wefan conwy.gov.uk, neu mae gwybodaeth ar gael gan ysgol eich plentyn.*

*NID YW'N FFURFLEN GORFODOL NEU STATUDOL. Mae hyn yn golygu nad oes raid i chi ei gwblhau ond efallai hyn yw’r ffordd hawsaf o sicrhau ein bid yn derbyn yr holl wybodaeth yr ydych am ei roid i ni.*

*Os ydych chi eisiau cyngor, arweiniad a chefnogaeth annibynnol gallwch gysylltu â'r Gwasanaeth Gwybodaeth a Chefnogaeth Anghenion Dysgu Ychwanegol, a ddarperir gan SNAP Cymru. Gellir cysylltu â SNAP Cymru mewn un o'r ffyrdd a ganlyn:*

*Cyswllt Ar-lein:* [*https://www.snapcymru.org/contact*](https://www.snapcymru.org/contact) *Ffôn: 0845 120 3730  
O symudol: 0345 120 3730*

*Sylwch: mae'r ffurflen yma ar gyfer plant 3-15 oed sydd yn mynychu’r ysgol NEU 5-15 oed ac yn derbyn addysg gartrefol ddewisol. Defnyddiwch y ffurflen Blynyddoedd Cynnar ar gyfer plant 4 oed ac iau ac nad ydynt yn mynychu'r ysgol* ***neu'r*** *ffurflen Person Ifanc os ydych chi'n 16 oed neu'n hŷn.*

This referral form is for you to share information with the school and/or Local Authority when you think that your child may have additional learning needs and requires additional learning provision (ALP).

This referral form will start the school or Local Authority ALN consideration process. Information on the process can be found online at conwy.gov.uk or leaflets are available from your child’s school.

IT IS NOT A MANDATORY OR STATUTORY FORM. This means that you do not have to complete it but you may find it to be the easiest way to make sure we have all the information you want to give to us.

If you want independent advice, guidance and support you can contact the Additional Learning Needs Information and Support Service, which is provided by SNAP Cymru. SNAP Cymru can be contacted in one of the following ways:

Online Contact: <https://www.snapcymru.org/contact>  
Telephone: 0845 120 3730  
From mobile: 0345 120 3730

Please note: this form is for children aged 3-15 and in school OR aged 5-15 and electively home educated. Please use the Early Years form for children aged 4 and under and not attending school **or** the Young Person’s form if you are 16 or over.

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| ***Manylion fy mhlentyn /* My child’s details** | |
| ***Enw llawn fy mhlentyn:***  **My child’s full name:** |  |
| ***Mae fy mhlentyn yn hoffi cael ei adnabod fel:***  **My child likes to be known as:** |  |
| ***Dyddiad geni fy mhlentyn:***  **My child’s date of birth:** |  |
| ***A yw fy mhlentyn yng ngofal Awdurdod Lleol?***  **Is my child in the care of a Local Authority?** | *Ydy* / Yes  *Na* / No  *Enw'r Awdurdod Lleol* / Name of Local Authority: |
| ***Enwau rhieni / gofalwyr:***  **Parents’/Carers’ names:** |  |
| ***Cyfeiriad Cartref gan gynnwys cod post:***  **Home Address including post code:** |  |
| ***Rhif (au) ffôn:***  **Phone number(s):** |  |
| ***Cysylltwch ag e-bost:***  **Contact e-mail(s):** |  |
| ***Cyfrifoldeb rhieni:***  **Parental responsibility:** | *Ydy* / Yes  *Na* / No |
| ***Fy hoff iaith i gyfathrebu yw:***  **My preferred language of communication is:** |  |
| ***Y dull cyfathrebu a ffefrir gennyf yw:***  **My preferred method of communication is:** | *E–bost* / E-mail  *Post* / Post |
| ***Manylion addysg* / Education details** | |
| ***Enw'r ysgol y mae fy mhlentyn yn ei mynychu ar hyn o bryd:***  **Name of the school my child is currently attending:** |  |
| ***Blwyddyn mae fy mhlentyn ynddo:***  **The year group my child is in:** |  |
| ***Mae fy mhlentyn yn cael addysg gartref ddewisol:***  **My child is electively home educated:** | *Ydy* / Yes  *Na* / No |

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| ***Gwybodaeth a thystiolaeth* Information and evidence** | | |
| ***Rhowch ddisgrifiad o gryfderau a meysydd angen eich plentyn* Please provide a description of your child’s strengths and areas of need** | | |
|  | | |
| ***Beth sy'n gweithio i'ch plentyn?* What is working for your child?** | | |
|  | | |
| ***Beth sydd ddim yn gweithio i'ch plentyn?* What is not working for your child?** | | |
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| ***Pam yr hoffech i'r ysgol / Awdurdod Lleol ystyried a oes gan eich plentyn anghenion dysgu ychwanegol?***  **Why would you like the school/Local Authority to consider whether your child has additional learning needs?** | | |
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| ***Rhowch fanylion unrhyw asiantaethau sy'n ymwneud â'ch plentyn ar hyn o bryd***  **Please provide details of any agencies currently involved with your child** | | |
| |  |  |  | | --- | --- | --- | | ***Enw***  **Name** | ***Asiantaeth/Proffesiwn* Agency/Profession** | ***Manylion cyswllt***  **Contact Details** | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | | | |
| ***Cyngor Ychwanegol* / Additional Advice** | | |
| *Os bydd yr Awdurdod Lleol / ysgol yn symud ymlaen â'r broses ystyried ADY, gallant ofyn am gyngor gan bobl berthnasol. Gall hyn gynnwys Seicoleg Addysg, Gwasanaeth Lles Addysg, Ymddiriedolaeth y GIG a Gofal Cymdeithasol Plant.*  *Mae barn, dymuniadau a theimladau eich plentyn yn bwysig ac yn ganolog i wneud penderfyniadau a chynllunio. Bydd yr awdurdod lleol yn gweithio i sicrhau bod eich plentyn yn cael ei alluogi i gymryd rhan drwy ymarfer sydd yn canolbwyntio ar yr unigolyn.*  *Mae Llywodraeth Cymru wedi cynhyrchu dogfen ganllaw ar gyfer teuluoedd:*  [*https://llyw.cymru/adolygiadau-syn-canolbwyntio-ar-unigolion-canllawiau-i-deuluoedd*](https://llyw.cymru/adolygiadau-syn-canolbwyntio-ar-unigolion-canllawiau-i-deuluoedd)  If the Local Authority / school proceed with the ALN consideration process, they may seek advice from relevant people. This may include Educational Psychology, Education Welfare Service, NHS Trust and Children’s Social Care.  The views, wishes and feelings of your child are important and central to decision making and planning. The local authority will work to ensure your child is enabled to participate as fully as possible through person-centred practice.  The Welsh Government have produced a guidance document for families:  <https://gov.wales/sites/default/files/publications/2018-12/person-centred-reviews-for-families.pdf> | | |
| *A oes unrhyw un arall yr hoffech i'r Awdurdod Lleol gysylltu gyda i gael cyngor ar eich plentyn?*  Is there anyone else you would like the Local Authority to contact for advice on your child? | *Ydy* / Yes  *Na* / No | |
| *Os oes, nodwch isod enw a manylion cyswllt.*  If yes please give their name and contact details below. | | |
| *Enw* / Name:  *Cyfeiriad* / Address:  *Cod Post* / Post Code:  *Rhif Ffon* / Telephone Number:  *Cyfeiriad Ebost* / Email Address: | | *Enw* / Name:  *Cyfeiriad* /Address:  *Cod Post* / Post Code:  *Rhif Ffon* / Telephone Number:  *Cyfeiriad Ebost* / Email Address: |

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| ***Datganiad* / Declaration** | |
| |  | | --- | | *Rydw i / rydym yn cadarnhau bod yr holl wybodaeth rydw i / rydyn ni wedi'i darparu ar y Ffurflen Gais am Riant / Gofalwr yn gywir ac yn cytuno y gall ysgol fy mhlentyn neu Gyngor Bwrdeistref Sirol Conwy gynnal ystyriaeth o Anghenion Dysgu Ychwanegol (ALN) fy mhlentyn. yn unol â Deddf Tribiwnlys Anghenion Dysgu Ychwanegol ac Addysg (ALNET 2018.*  I/we confirm that all of the information I/we have supplied on the Parent/Carer Request Form is correct and agree that my child’s school or Conwy County Borough Council may carry out a consideration of my/our child’s Additional Learning Needs (ALN) according to the Additional Learning Needs and Education Tribunal Act (ALNET 2018). | | *Rydw i / Rydyn ni'n rhoi caniatâd i'r wybodaeth yma gael ei rannu â staff yr ysgol a Llywodraethwyr fel sy'n briodol er mwyn ein helpu i ymateb i'r atgyfeiriad hwn.*  I / We give permission for this information to be shared with school staff and Governors as appropriate in order to help us to respond to this referral. | | *Rydw i / Rydyn ni'n rhoi caniatâd i'r wybodaeth yma gael ei rannu gyda'r panel cymedroli anghenion dysgu ychwanegol amlasiantaethol fel sy'n briodol er mwyn ein helpu i ymateb i'r atgyfeiriad hwn*.  I / We give permission for this information to be shared with the multi-agency additional learning needs moderation panel as appropriate in order to help us to respond to this referral. |   \**Os na fyddwch yn cydsynio i'r wybodaeth yma gael ei rhannu, byddwch yn ymwybodol efallai na allwn brosesu'r atgyfeiriad hwn.*  If you do not consent to this information being shared please be aware that we may be unable to process this referral. | |
| ***Dyddiad chwblhau:***  **Date form completed:** |  |
| ***Llofnodwyd:***  **Signed:** |  |
| ***Enw print:***  **Print name:** |  |