OCC USE ONLY	
CAT OFFICER:	REVIEW DATE:
STUDENT ID:	

OXFORDSHIRE COUNTY COUNCIL

Penalty Notice Referral to the County Attendance Team

Referrer please complete all sections of form as fully as possible (reverse for OCC use only)

PUPIL DETAILS		
Surname	NCY	UPN
Other surname pupil may be known by	Date of Birth	
Forename(s)	Gender	Male ☐ Female ☐
Address		
Post Code	Current School	
Looked After Child?	Yes ☐ No ☐	

Referral Reason: *(One only)*	Unauthorised Absence	☐	Unauthorised Holiday in Term Time	☐

REFERRAL DETAILS	
Referral Date:	Referred By (name):
Job Title/Dept:	Phone No:
School/Agency Name:	Fax No:
Email Address:	

In submitting this referral **I confirm that the underlying causes of this pupil's poor attendance have been investigated, appropriate support has been offered and that use of the Penalty Notice process (Antisocial Behaviour Act 2003) is appropriate in this case.** I understand that if a fine is not paid and legal action is taken by the County Attendance Team **I may be required to provide a statement and give evidence in court** as to the appropriateness of this action. This is also confirmation that we have a current attendance policy in place. Penalty Notices are itemised within this, and parents have been informed of this process.

Please indicate if the following agencies are involved:

PCAMHS/CAMHS	☐	**If any of these agencies are involved, it may not**
Social Care	☐	**be appropriate to issue a Penalty Notice Warning/Fine.**
LCSS	☐	**Please discuss further with the County**
Kingfisher	☐	**Attendance Team.**

Please indicate where a request is for Unauthorised Absence if an Early Help Assessment has been offered or completed with the family: Y/N

Please attach an up-to-date Attendance Certificate for last 60 School Sessions, to the date of referral. Please ensure there are no 'N' marks and unauthorised holidays are marked as 'G' on the certificate

PARENT/GUARDIAN/CARER DETAILS

Person 1 with whom the pupil lives	
Title:	Surname:
Forename:	
Address (if different):	
Post code:	
Home Phone/mobile:	
Work Phone :	
Parental Responsibility? Yes ☐ No ☐	
Relationship to pupil:	
Employed? Yes ☐ No ☐	
Health/Communication difficulties:	
First language:	

Person 2 with whom the pupil lives	
Title:	Surname:
Forename:	
Address (if different):	
Post code:	
Home Phone/mobile:	
Work Phone:	
Parental Responsibility? Yes ☐ No ☐	
Relationship to pupil:	
Employed? Yes ☐ No ☐	
Health/Communication difficulties:	
First language:	

Please send to The County Attendance team by email: Attendance@oxfordshire.gov.uk Tel: 01865 323513
Fax: 01865 783327

OCC USE ONLY

Reason for Penalty Notice (*tick ONE only)*		**Date Range**
Pupil has 6 or more unauth absences in no more than 6 weeks	☐	
Pupil has 6 or more unauthorised holiday absences in no more than 6 weeks	☐	
Pupil has been stopped on a Truancy Sweep	☐	
Parent/carer has failed to ensure attendance of provision other than Mainstream site	☐	

Number of sessions: **Attendance** ☐ **Unauthorised** ☐ **Possible** ☐

PARENT/CARER 1

PENALTY NOTICE ACTION	*(x)*	**Date authorised**	**Authorised by**
Issue PN Warning Letter	☐		
Issue Penalty Notice	☐		
Issue Non-Payment Letter	☐		

CLOSURE

Warning stage – post review – NFA	☐	PN – full Payment received	☐
Withdraw- Ought not to have been issued	☐	Withdraw- Outside terms of Code of Conduct	☐
Withdraw-Contained material errors	☐	Withdraw - Issued to Wrong Person	☐
Withdraw -over 28 days unpaid but not pros	☐	No Payment received – referred for Prosecution	☐

Authorised by: .....

PARENT/CARER 2

PENALTY NOTICE ACTION	*(x)*	**Date authorised**	**Authorised by**
Issue PN Warning Letter	☐		
Issue Penalty Notice	☐		
Issue Non-Payment Letter	☐		

CLOSURE

Warning stage – post review – NFA	☐	PN – full Payment received	☐
Withdraw- Ought not to have been issued	☐	Withdraw- Outside terms of Code of Conduct	☐
Withdraw-Contained material errors	☐	Withdraw - Issued to Wrong Person	☐
Withdraw -over 28 days unpaid but not pros	☐	No Payment received – referred for Prosecution	☐

Authorised by: .....