**SUPPORTING LEARNERS’ SERVICE**

**WEIGHTED/ PRESSURE EQUIPMENT/ WRITING SLOPE/ CUSHION FORM**

**CHILD’S NAME: ……………………………………            DOB: ………..                        YEAR/STAGE………**

**SCHOOL ……………………………………………………………………….                  DATE:…………………**

**ASSESSMENT**:

|  |  |
| --- | --- |
| **To be completed in conjunction with guidance ‘Listen to Learn’ and ‘Staying Calm in Class’.** **Please tick to confirm that you have checked the following:**  |   |
| Chair and table height appropriate for child  |   |
| Desk height at approximately elbow level  |   |
| Child’s feet flat on floor  |   |
| Bottom back in seat  |   |
| Chair pulled into desk  |   |
| Child facing blackboard/whiteboard (no obstructions)  |   |
| Desk clutter free              |   |
| Adequate lighting  |   |
| Minimum noise and distractions  |   |
| Regular movement breaks  |   |

Please briefly describe child’s presenting behaviours ………………………………………………………………………………………….

………………………………………………………………………………………….

**EQUIPMENT REQUESTED (please tick) Please check** [**www.sensorydirect.co.uk**](http://www.sensorydirect.co.uk/) **for sizing and weights**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Size/ weight**  | **XXS**  | **XS**  | **S**  | **M**  | **L**  | **XL**  |
| Deep pressure vest (bear hug)  |   |   |   |   |   |   |
| Weighted compression vest  |   |   |   |   |   |   |
| Weighted fleece  |   |   |   |   |   |   |
|   | **800G**  | **1.2KG**  | **2.0KG**  | **3.0KG**  | **1KG**  | **2KG**  |
| Weighted lap pad  |   |   |   |   |   |   |
| Weighted shoulder wrap  |   |   |   |   |   |   |
| Weighted blanket  |   |   |   |   |   |   |
| Writing slope  |   |   |   |   |   |   |
| Red round cushion  |   |   |   |   |   |   |
| Blue wedge cushion  |   |   |   |   |   |   |

Name, Designation and contact details of person requesting equipment ………………………………………………………………………………………………………………………………………………………………………………………………

Please return this form by email to; supportinglearners@fife.gov.uk

**Please be advised that the person requesting the equipment is responsible for monitoring it’s use.  If the equipment is no longer required please contact Supporting Learners Business Support on VOIP 442065 or on e-mail above to arrange for it to be returned.**