



YEAR 2 Term 1 MEETING

Date of meeting.....

- a) Year 1 Term 3 results feedback
- b) Check student has informed admin. of change of address where applicable
- c) Check student is aware of Year 2 curriculum
- d) Check student is aware of holiday dates and has booked travel accordingly

Further matters were discussed Yes No

Note of matters discussed (optional)

Signatures:

Student.....Tutor.....

Criminal Conviction Record and/ or personal health situation -

Yes, there has been a change: Student's Signature.....

No, there has been no change: Student's Signature.....



YEAR 2 Term 2 MEETING

Date of meeting.....

- a) Year 2 Term 1 results feedback
- b) Check students aware of holiday dates and has booked travel accordingly
- c) Remind student to complete bursary continuation form as soon as it is received
- d) Sickness / absence to date

Further matters were discussed Yes No

Note of matters discussed (optional)

Signatures:

Student.....Tutor.....

Criminal Conviction Record and/ or personal health situation -

Yes, there has been a change: Student's Signature.....

No, there has been no change: Student's Signature.....



YEAR 2 Term 3 MEETING

Date of meeting.....

- a) Year 2 Term 2 results feedback/ discuss remedial action
- b) Check Lit Review/ Project supervision in place
- c) Check students aware of holiday dates and has booked travel accordingly
- d) Remind student to complete bursary continuation form as soon as it is received
- e) Sickness / absence to date

Further matters were discussed Yes No

Note of matters discussed (optional)

Signatures:

Student.....Tutor.....

Criminal Conviction Record and/ or personal health situation -

Yes, there has been a change: Student's Signature.....

No, there has been no change: Student's Signature.....



REQUESTED PERSONAL TUTORIAL

Student's name.....

Date

Student and tutor should agree this record, complete a copy each and sign both.

Students should be made aware that in some cases confidential information may have to be shared with other members of staff and that any written information will be kept in their file:

Signatures:

Student.....Tutor.....



ACTION PLAN (Arising from personal tutor meeting)

(to be completed during personal tutor meeting if applicable)

Student's name.....

Date

DESIRED OUTCOMES / GOALS

ACTIONS / RESOURCES (Dates to be achieved)

**DEMONSTRATION OF ACHIEVEMENT / EVALUATION
COMPLETED BY:**

Signatures:

Student.....Tutor.....