Student Name	
Student CRN	Office use only
Student D.O.B	CRN/DOB label here
Support Type	

Invoice number	
Company name	Falmouth Exeter Plus
Funding body	



## **Attended sessions**

Mode of Delivery	Date	Start Time (HH:MM)	Finish Time (HH:MM)	Total Breaks* (HH:MM)	Total Hours	Student Signature	Support Worker (PRINT NAME)	Support Worker Signature
		l Date	l Date	l)ate	l Date	l)ate	Date Student Signature	Data Student Signature Student Signature

<sup>\*</sup>Breaks – Support provided more than 8 consecutive hours are expected to include a break. Breaks must be recorded within 15min blocks. 'Comfort' breaks taken during shorter sessions do not need to be declared

## **Missed or Cancelled Sessions**

Only chargeable missed/cancelled sessions should be included in this section. To ensure that we can process the invoice in a timely manner, please state the date and time when you were informed by the student that the session was cancelled along with the reason for cancellation. For non-attendance please enter "NA" into the Date and Time Informed box below.

Reason	Date	Start Time (HH:MM	Finish Time (нн:мм)	Total Hours	Date & Time Informed

|--|

## Session Work Plan Support worker name Student name Support type Session date Part A: To be completed by the Support Worker before the session Please record below details of the topic(s) to be covered during the session: Part B: To be completed by the Student after the session Was the session useful for you? ☐ Yes ☐ Partlv $\square$ No Did the support worker offer you regular breaks if required? ☐ Yes □ No Do you feel the session delivered was at a pace suitable for your needs? $\square$ Yes $\square$ No Please note any comments you want to raise or you would like your support worker to consider (for example, on the pace of the session; availability of breaks if needed): When booking this session, did you get a reply within 1 working day? $\Box$ Yes $\Box$ No Was your session confirmed between 1 and 7 days before it took place? $\square$ Yes $\square$ No Part C: To be completed by the Support Worker after the student has completed part B Please record below details of the topic(s) which were covered during the session: Please record below next steps: Support worker's signature

Student's signature