PRIVATE AND CONFIDENTIAL

**Insert your address**

**Telephone number**

**Email address**

 **[Insert name and address of local authority]**

**[Insert date]**

**- REQUEST FOR A CARERS ASSESSMENT UNDER CHILDREN ACT 1989 -**

Dear

**INSERT NAME OF CHILD OR YOUNG PERSON AND DOB**

**INSERT ADDRESS**

I am the parent the above named **[child / young person]**.

**[insert name]** is **[age]** and **[set out details of diagnosis and needs]**.

I am therefore writing to formally request a parent carer’s needs assessment pursuant to Section 90 of the Children & Families Act 2014 and Sections s17ZD and s17ZE of the Children Act 1989.

I understand that when an assessment is requested the local authority has a legal duty to assess my needs for support and whether those needs can be met by services. Those services should then be included in H1 of **[insert name of child or young person’s]** EHC plan.

Please acknowledge receipt of this letter by return.

Yours faithfully

**[insert name]**