**Emotional Wellbeing Menu for Education Settings –**

 **Assembly and Workshop Request Form (2024-25)**

We support education settings implement a Whole School Approach to wellbeing. In addition to the range of pre-recorded workshops on our website we are able to facilitate workshops or assemblies for student or parents.

Please email requests to: lpft.cyptraininglead@nhs.net

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| --- | --- |
| **Education setting name**  |  |
| Postcode:  |
| **Contact name at education setting**  |  |
| **Job role**  |  |
| **Contact name of staff member attending the session, if different to above** |  |
| **Email address** |  |
| **Number of Students attending** |  |
| **Age range / year group of students**  |  |
| **Which of the workshops/ assemblies would you like to access?** |
| **Assemblies** | **Primary**  | **Secondary**  |
| Anxious feelings  |  |  |
| 5 Steps to Wellbeing |  |  |
| Mental Health Awareness |  |  |
| **Workshop** | **Primary** | **Secondary** | **Parent/Carer** |
| Anxious feelings:  |  |  |  |
| Co-regulation:  |  |  |  |
| Healthy Lifestyle:  |  |  |  |
| Low Mood:  |  |  |  |
| Mental Health Awareness:  |  |  |  |
| Resilience:  |  |  |  |
| Self-esteem:  |  |  |  |
| **When would be most convenient to access the session?** |  |

**Additional Expectations for Schools regarding Workshops:**

* Ensure students are present at the agreed start time, be aware of the reason for the session and reason they are attending
* It is the school’s responsibility to gain consent to attend the workshops
* Not to exceed number of students agreed on booking
* Allocate an appropriate room without interruptions that is ready 15 minutes prior to the workshop with access to projector/ SmartScreen, speakers and internet connection
* Nominate a member of staff who will:
1. oversee the arrangements,
2. be present throughout the workshop/ assembly to support with classroom management
3. acquire skills to support the school community longer term
4. be available for feedback afterwards.