

FREE PRINTABLE · DLA FOR A CHILD UNDER 16

Statement from school or nursery

A template for someone at your child's school or nursery to describe the extra help your child needs, compared with other children of the same age. Give it to them with the note at the bottom of this page.

For you, the parent or carer

- **Who to ask.** Someone who knows your child well and sees the help they need: the class teacher, the SENCO, a support worker or teaching assistant, or the nursery key worker.
- **Question 32** of the claim form asks for someone at the school or nursery the DWP can contact if it needs more information. If you name this person there, let them know.
- **Question 38** asks if anyone else who knows your child can tell the DWP about their difficulties. That person writes a statement on page 10 of the form and signs the declaration on page 11. These pages help them plan it. If the box is too small, the form says to use question 89 or separate sheets with your child's full name and National Insurance number on each, signed and dated, as these pages are.
- **Question 37** asks about plans such as an EHCP or IEP. If your child has one, send a copy: the form says it may help the DWP decide more quickly.
- **Copies only.** Send a copy with the form and keep the original. The DWP cannot return original documents.

A NOTE YOU CAN HAND OVER WITH IT

I am claiming Disability Living Allowance (DLA) for my child. For a child under 16, DLA looks at how much more help a child needs than a child of the same age who does not have a disability.

Could you describe the help my child needs at school or nursery: what, how often, how long it takes and what happens without it? The next pages have prompts. Please write only what you know, and sign and date each page. Thank you.

This sheet follows the DLA claim form for a child under 16 used in England and Wales (DLA1 Child, dated 10/25). In Scotland, new claims for children are Child Disability Payment from Social Security Scotland (mygov.scot), not DLA. In Northern Ireland, DLA for children is run by the Department for Communities (nidirect).

Statement about a child at school or nursery

Thank you for helping. This child's parent or carer is claiming Disability Living Allowance (DLA). For a child under 16, DLA looks at the extra help a child needs compared with children of the same age who do not have a disability. It is paid for the effect of a condition on the child, not for the condition itself. Please describe what you see, in your own words: what help is needed, how often, how long it takes and what happens without it.

CHILD'S FULL NAME	DATE OF BIRTH	NI NUMBER, IF ANY

ABOUT YOU	
Your name	
Job or role (for example class teacher, SENCO, support worker or key worker)	
School or nursery and its address	
Phone number	
How long you have known the child	
When you last saw the child	

The child's needs compared with other children of the same age

What extra help does this child need that most children of the same age in the class do not? How much of the day does it take up?

SIGNED	DATE

CHILD'S FULL NAME	DATE OF BIRTH	NI NUMBER, IF ANY

Communication

Understanding what is said and following instructions, telling adults how they feel or what they need, being understood by staff and other children, any signs, symbols or aids (for example Makaton or PECS).

Behaviour, safety and supervision

Awareness of common dangers, coping with planned and unplanned changes to routine, anxiety or distress, acting impulsively, harm to themselves or others. How often does an adult need to step in, and what happens if no one does?

Personal care: toilet, eating and dressing

Going to and using the toilet, accidents, eating meals, changing for PE, taking medicine. Who helps, how often and for how long?

SIGNED	DATE

CHILD'S FULL NAME	DATE OF BIRTH	NI NUMBER, IF ANY

Learning and development

Extra help with learning, following instructions, concentrating, playing and joining in with activities. Any time in a special unit or with one-to-one help.

Moving around, outdoors and trips

Moving safely between lessons, the playground, school trips, awareness of traffic and road safety, falls.

Social interaction

Playing with others, making and keeping friends, how they get on with children of their own age and with adults.

SIGNED	DATE

CHILD'S FULL NAME	DATE OF BIRTH	NI NUMBER, IF ANY

Support in place

Tick any the child has (these are the plans listed at question 37 of the claim form).

- ☐ Educational Health Care Plan (EHCP)
- ☐ Individual Education Plan (IEP)
- ☐ Individual Behaviour Plan (IBP)
- ☐ A letter, note in lieu or statement of Special Educational Needs from the local authority
- ☐ Co-ordinated Support Plan (CSP)
- ☐ Waiting to hear about one of these
- ☐ None of these

ONE-TO-ONE OR SMALL GROUP HELP: WHAT FOR, HOURS A WEEK

A recent example

One recent day or incident: what happened, what help was needed, how long it took and what would have happened without it.

What I have written is true to the best of my knowledge.

SIGNATURE	DATE
PRINTED NAME	JOB OR ROLE