

EHCNA Application Guide for Parents

1. Introduction

The new digital EHCNA application process for Parents replaces the previous manual form as of 2nd June 2025. The new form is more comprehensive and consequently takes longer to complete – around an hour or so, and it helps to be prepared. The additional information helps in the assessment. The importance of the application makes it worth the effort.

For parents with a child at school it's often best to make an application through and with the school who will fill in an application on your behalf. Parents have a right to make an application for their child themselves. It is always useful to make school aware if you are making an application so they can collate their SEND support documentation as Leicestershire's SENA will request this information from the school once an application has been made.

For parents whose child is not in school, you are the advocate for your child and it's important that you communicate your child's issues in the best way possible.

The Parent application form has the following sections:

1. Information about the form
Explains what the form is for, information collected and why we need it, how long it takes to complete and what happens next
2. Agreement
Basic details – area you live in, age details of child and details of consent for use of information
3. Your details
Name and contact details
4. Child or Young Person details
Child name, age, education setting and reason for applying for an EHCP
5. Child or young Person views
Questions that help to understand how your child sees themselves and how others see them, what they enjoy, difficulties they have, what might help and how they see the future
6. Family conversation
These questions allow the parent or carer to express what they think would help the child
7. Keeping you informed
If you want to follow progress you can select automated text messages, normal email support or both

The form is open for 60 minutes between saves and can be saved at multiple points. You can also come back to it to amend and continue with completion before submitting the form. Other documents can also be attached in support of your application. If there are questions to which you don't have an answer, please add 'N/A' or 'Not sure'

Once you have completed and submitted the form, you will see a printable version of the form and it will be available in 'My Requests'. The form will be sent to the Assessments team, and you will receive an email advising you of the submission.

If for any reason you are unable to complete the form, please contact the SENA Service for help.

2. Creating an account

To ask for an assessment you will need to create an account as a once off process. From then on you can log in.

To create an account, click on the [link](#) to take you to the webpage '**Get help with your child's progress**' where the link is shown below

Option A: Directly

You can ask the Special Educational Needs Assessment (SENA) service directly for an assessment – complete the form below, if you're either:

- a parent or carer of a child or young person, for whom you have responsibility
- a child or young person (over the age of 16) requesting an assessment for yourself

[Request for Educational Health and Care Needs Assessment \(EHCNA\) - parent/carer or young person application](#) 

Selecting this will take you to an account sign up or login. If you do not have an account, select 'Sign up'



Before you begin

Some of our forms require a Self account. LOG IN BELOW.

[Sign up now](#)

[Already have an account? LOG IN HERE](#)

Complete the registration details (and ensuring password complies with rules) and submit the application, after which you can log in

Registration

Please enter your email and a password to register for Self. Your password must be at least 9 characters long and contain at least one number and one lower case letter. It can contain any of the following special characters: ! @ \$ ^ _ * ~

Email *	<input type="text" value="somebody@smewhere.co.uk"/>	✓
Password *	<input type="password" value="*****"/>	✓
Confirm Password *	<input type="password" value="*****"/>	✓

3. Logging in

To log in, click on the [link](#) to take you to the webpage ‘**Get help with your child's progress**’, and select the following

Request for Educational Health and Care Needs Assessment (EHCNA) - parent/carer or young person application 

Selecting this will take you to an account sign up or login. If already have an account, select ‘Login’



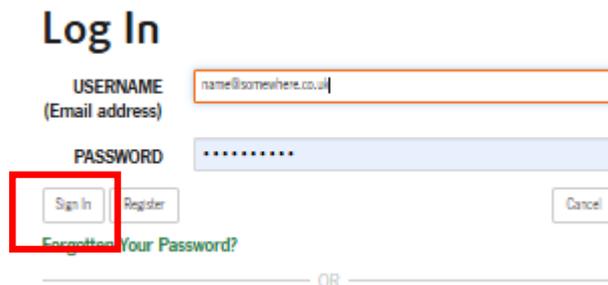
Before you begin

Some of our forms require a Self account. LOG IN BELOW.

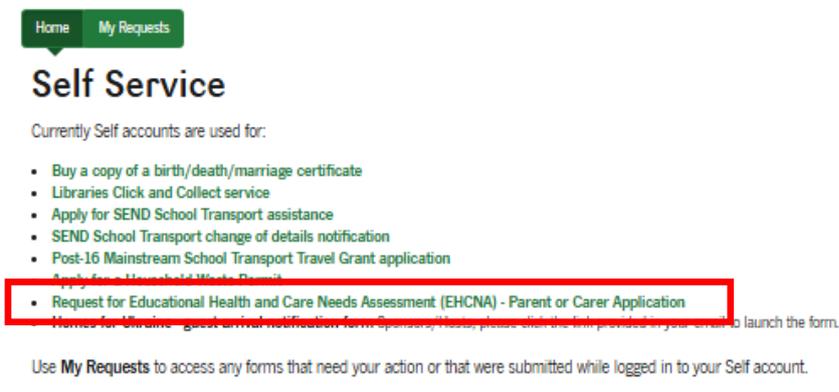
[Sign up now](#)

[Already have an account? LOG IN HERE](#)

Select Login and add your details and select ‘Sign in’

The image shows a 'Log In' form with two input fields: 'USERNAME (Email address)' containing 'name@somewhere.co.uk' and 'PASSWORD' with masked characters. Below the fields are three buttons: 'Sign in', 'Register', and 'Cancel'. The 'Sign in' button is highlighted with a red rectangular box. Below the buttons is a link for 'Forgotten Your Password?' and an 'OR' separator.

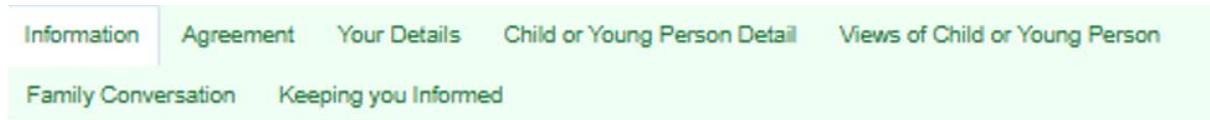
This displays the following ‘Self Service’ screen. If this is a new application, select ‘Request for Educational Health and Care Needs Assessment (EHCNA) – Parent or Carer Application’



If you are returning to a previously saved application, select ‘My requests’. If you have several requests, use the ID on the email you will have been sent to identify and retrieve the form and continue with your application.

4. EHCNA Application Form guidance and tips

The form is interactive with drop down lists to help selection, in some cases with options and in others free text where you can add detail. The sections are shown at the top of the page and highlights where you are progressing in the form.



The sections are completed sequentially and **next** is selected to move to the next page.

At the bottom of each page there are options to cancel, save and to move to the next page



Save can be used at any point and the form can be returned to later in your account.

Mandatory data is indicated by a red asterisk *

Some sections where additional information is needed, as for example below - add the information and click on the 'Add Record' button (bottom right of section). This is shown where there is a 'Please press 'Add record button'' ribbon on the screen. If this is not selected, the data will not be saved, and an error will show when you have completed the form

Items highlighted in a red box are important

4.1 Information

The information here requires no required input but advises the parent/carer how information is used and an overview of the process

Request for Educational Health and Care Needs Assessment (EHCNA) - Parent or Carer Application

Information Agreement Your Details Child or Young Person Detail Views of Child or Young Person

Family Conversation Keeping you Informed

i Your 80-minute user session has begun.

- You can **save your progress** if you need to extend your session or want to come back to the form later.
- You can **download a PDF copy** of your form progress at any time (in the sections that follow).

Who should use the form

This form allows Parents/Carers to make an application for an Education, Health and Care Needs Assessment (EHCNA) for a child or young person for whom they have responsibility.

A child or young person, over the age of 16, can also complete this form for themselves.

Purpose of the form

The information in the form lets the Special Educational Needs Assessment (SENA) team service handle and support work on the application in the best possible way.

Information collected

The information we ask for includes an agreement for us to use the information you provide, some details about yourselves and your child or young person, and some questions to get an idea what your child or young person likes, how they find school / setting, and what you would like for your child.

Benefits of collecting information

Our staff who assess child or young person's needs have a wide range of expertise in supporting young people with additional or special educational needs. The information we ask for helps them understand the child or young person's needs and how they can be best supported.

How long it takes to complete

This varies depending on how much information you enter, but it should be expected to take an hour or more.

You can save the form at any point and come back later to complete it before sending a final version.

What happens next

The team will collect other information from school / setting and other relevant partners and a Multi Agency Panel will then review the information to decide how best to progress the application. This will take place within 6 weeks of your application.

If you have difficulties completing the form, please contact your school Special Educational Needs Coordinator (SENDCO) for assistance or alternatively the [Leicestershire County Council Special Educational Needs Assessment \(SENA\) team](#)

Automated Processing and Use of Artificial Intelligence (AI)

We may use automated systems, including artificial intelligence (AI) tools, to support decision-making and improve the efficiency and accuracy of our services. These systems may process personal data to help identify patterns, assess eligibility, or provide recommendations.

All processing is conducted in line with data protection legislation. Where AI tools are used to make decisions that have legal or significant effects on individuals, you will be informed, and you may have the right to request human intervention, express your point of view, and contest the decision.

4.2 Agreement

The information and application process involves use of the data provided to the authority and this is outlined for acknowledgement and agreement by the parent/carer.

Initial information about the child is collected – location and age

Assessment (EHCNA) - Parent or Carer Application

Information Agreement **▲** Your Details Child or Young Person Detail Views of Child or Young Person
Family Conversation Keeping you Informed

Which borough does the child or young person, for whom this request is being made, live in? * ✓

Are you completing this as the child or young person or on behalf of them * ✓

Agreement

Please tick the box below to indicate that:

- Your views have been included in this form.
- You agree to a request for an EHC Needs Assessment being submitted to the Local Authority.
- You agree to a copy of this form being shared with the Local Authority alongside supporting information (as detailed within this form).
- You agree to any professionals, instructed by the Local Authority to gather additional information about your son/daughter's needs for the purpose of an EHC Needs Assessment, to do so. This will include Early Help, Health professionals, Social Care, The Educational Psychology Service and the Specialist Teaching Service.
- This information will be accessible to you throughout this process.

Child or Young Person's Date of Birth * ✓

Child or Young Person's Year Group * ✓

Child or Young Person's Age

Parent or Carer * I confirm that the information provided is correct and I agree for this information to be used and shared as appropriate. ✓

4.3 Your Details

Your own details should be added as the applicant to ensure that we can remain in contact

Information Agreement  Your Details  Child or Young Person Detail Views of Child or Young Person
Family Conversation Keeping you Informed

Your Details - details of the person completing the form

First name * ✓

Surname * ✓

Email address * Please check you have typed the email address correctly with no spaces in it or at the end
 ✓

Contact Number * ✓

 To be kept up to date throughout this process with text notifications, please provide your mobile number

4.4 Child/Young Person Detail

This section collects details of the child and parent/carers, and has a free text section allowing the parent/carer to state why the child needs an EHCP

Add child details

This form is for use for all requests to assess children and young people aged 0-25.

There may be sections that are not relevant and can be left blank.

Please only include information relevant to the child/young person this is for.

Child or Young Person's First Name *	<input type="text" value="Name"/>	✓
Child or Young Person's Middle Name(s)	<input type="text"/>	
Child or Young Person's Surname *	<input type="text" value="Child"/>	✓
Child or Young Person's Preferred Name	<input type="text"/>	
Child or Young Person's Current education *	(e.g. School, Nursery, Childminder etc.) <input type="text" value="Leicestershire Schools"/>	✓
Child or Young Person's School Name *	<input type="text" value="Ab Kettleby Primary School"/>	✓
Has the child or young person been in education within the last 6 months? *	<input checked="" type="radio"/> Yes <input type="radio"/> No	✓
Child or Young Person's Date of Birth *	Day Month Year 10 10 2015	
Child or Young Person's Year Group *	Select...	
Child or Young Person's Address		
Postcode *	Addresses in Leicestershire only <input type="text" value="LA12 3BH"/>	✓
Results *	<input type="text" value="Select..."/>	

And then add a/the person with parental responsibility

Name of person who has Parental Responsibility of the child/young person.
Only one named person is required.

Additional parent/carer details can be added in the following question.

First Name *	<input type="text" value="Parent"/>	✓
Middle Name(s)	<input type="text"/>	
Last Name *	<input type="text" value="Responsible"/>	✓
Relationship to Child *	<input type="text" value="Mother"/>	✓

Some additional child details are collected for context

Child or Young Person's Religion	<input type="text"/>	
Child or Young Person's NHS Number (if known)	<input type="text"/>	
Child or Young Person's First Language *	<input type="text" value="English"/>	✓

If required, additional adults or carer details can also be added.

Be sure to select the 'Add Parent' button to make sure the additional details are recorded as more than one additional person can be selected

 In the section below, you can enter details for each additional parent or carer.
To save their information, you must click the "Add Parent" button for each individual entry.

Child or Young Person's Parent or Carer Name *	<input type="text" value="Another parent"/>	✓
Relation to Child *	<input type="button" value="Parent"/> <input type="button" value="Carer"/> <input type="button" value="Other"/>	✓
Parent's Postcode *	<input type="text"/>	
Parent's Street Address *	<input type="text"/>	

 Add Parent

The final part of this section is essential to the form and requests details of the reason for applying for an EHCP

Child or Young Person's Social Care Status *

No Social Care Involvement

Open To Social Care - No Current Status

Looked After Child

Child Protection

Child In Need

Family Help

Don't Know

Is the child or young person's parent(s) currently serving in the armed forces? *

Yes

No

Is the child or young person's school/setting currently aware of this application? *

Yes

No

Don't Know

Does the child or young person have a formal diagnoses? *

Yes

No

Please give a description of why you are requesting an EHC Needs Assessment *

4.5 Views of Child/Young Person

It is important to provide a picture of key aspects of how the child sees themselves and how others see them.

Ideally this information is asked for from the child themselves

Documents can be added here to support this.

i Your child or young person is at the heart of what we do. Having their voice heard is extremely important to us, please complete this section with that in mind

(If you are unable to answer any of the questions below, please write "N/A" or "Not Sure")

How would the child or young person describe themselves? *

e.g. funny, kind, helpful, loyal, anxious etc.

How do other people describe the child or young person? *

Please add a photo of the child/young person or a picture that is important to them.

Drop files here to upload -  upload

Uploaded: 0 of 1

What do you enjoy?

In Education *

At Home/In the community *

What do you not enjoy?

In Education *

At Home/In the community *

What are you good at?

In Education *

At Home/In the community *

What do you find difficult?

In Education *

At Home/In the community *

What helps you to overcome these difficulties?

In Education *

At Home/In the community *

What extra help would you like?

In Education *

At Home/In the community *

Your Future

What are your hopes for the future? *

What steps do you need to take to achieve them? *

Child or young person's name, I completed this activity with *

4.6 Family Conversation

This section allows the family and others to cover what they think is important for the child.

Again documents can be uploaded to support or illustrate the case being made.

i (If you are unable to answer any of the questions below, please write "N/A" or "Not Sure")

What do the parent or carer feel are the child or young person strengths? *

Any other information relevant to the child or young person and this request? *

(tip: Think in terms of support received, people the child/young person knows and likes, why the things they think are good in the child/young person's life are working well)

What do the parent or carer want for the child or young person in the future? *

Is there any additional support the child or young person family may find helpful? *

(This could be in school / setting, support from Social Care or from Health Services)

What do the parent or carer think is working well and needs to stay the same?

Support currently in place *

(This could be in school / setting, support from Social Care or from Health Services)

What is this support achieving? *

(This could be in school / setting, support from Social Care or from Health Services)

Who provides this support? *

(This could be in school / setting, support from Social Care or from Health Services)

How often does this happen? *

(This could be in school / setting, support from Social Care or from Health Services)

What do the parent or carer feel isn't working well and how does it need to change?

What the child or young person need help with * (This could be in school / setting, support from Social Care or from Health Services)

What could be put into place * (This could be in school / setting, support from Social Care or from Health Services)

Who would provide this * (this could include family and friends)

How would the child or young person benefit * (This could be in school / setting, support from Social Care or from Health Services)

Please upload any additional document

e.g. targeted plan, therapist report etc.

Drop files here to upload -

Uploaded: 0 of 20

4.7 Keeping you informed

The final section can be used to ensure that you are kept up to date by conventional email traffic of with additional texts messages as your case progresses

The screenshot shows a web form with a light green header. The header contains several tabs: 'Information', 'Agreement', 'Your Details', 'Child or Young Person Detail', and 'Views of Child or Young Person'. Below the header, there are two tabs: 'Family Conversation' and 'Keeping you Informed'. The 'Keeping you Informed' tab is active. Below the tabs, there are two questions:

1. 'Would you like to be kept up to date on the progress of your request? *' with radio buttons for 'Yes' (selected) and 'No'. A green checkmark is visible to the right.

2. 'Would you like to be kept informed via text message or email? *' with checkboxes for 'Text' (checked) and 'Email'. A green checkmark is visible to the right.

At the bottom of the form, there are four buttons: '< Previous', 'x Cancel', 'Save', and 'Submit'.

If there is missing information when the form is submitted, you will be directed back to the area where the information supplied doesn't work