



Behavioural Difficulties Information Form

Name of Participant:

Age:

School / Establishment attended:

Town:

Booked on PGL course / tour with school? YES / NO Centre / Destination:

Booked on PGL holiday as individual? YES / NO Holiday Reference:

1. What are the Behavioural Difficulties that he / she displays?
2. Are these due to a medical condition? YES / NO? If so, please provide a doctor's note with recommendations and details of any medication taken.
3. What special supervision arrangements are made to control his / her behaviour at school?
4. Has he / she been away on a school trip before YES / NO? If yes, please provide details and explain whether his / her behaviour presented problems.
5. Has he / she been on a residential holiday / course before YES / NO? If yes, please provide details and explain whether his / her behaviour presented problems.
6. If this form has been completed by a parent / guardian, please provide a contact name, address and phone number at school / establishment attended for us to speak to.
7. This space is for any other relevant information:

Very many thanks for your assistance. We will get back to you as soon as possible.

Name of person completing form:

Relationship to the child / pupil:

I confirm that the details I have supplied are accurate and truthful.

Signed:..... Date: