

Appendix 1 Request for Change in Placement and Allowance Approval Group

Child's name:

Date of Birth:

Mosaic number:

Request	Yes/No
Placement Move - Has provider served notice on current placement? <i>If so, please state date and length of notice</i>	
Independent Placements Request for change in support	
SGO allowance	
CAO allowance	
Adoption Allowance	

Summary

Supporting documents

Documents	Date
Assessment	
Chronology	
Child's Permanence Planning Meeting	
Stability Meeting	
Financial assessment	
Support Variation request form – for amendments to independent placements	

Decision

Date of Request for Change in Placement and Allowance Approval Group:

Resources	Decision
SGO allowance	
CAO Allowance	
Adoption Allowance	
Change of Placement	

Actions	Date to be completed by:	Team Manager Responsible