## Transitieformulier

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| Leerling | |  | Adres |  | |
| Achternaam: | |  |  |  | |
| Voornamen/-letters: | |  | Straat en huisnummer: |  | |
| Roepnaam: | |  | Postc. en woonplaats: |  | |
| Geboortedatum: | |  | Telefoonnummer: |  | |
| BSN: | |  | E-mailadres: |  | |
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| School |  | | | |  |
| Naam school: |  | | | | PRO / VSO |
| Adres: |  | | | |  |
| Contactpersoon: |  | | | |  |
| Telefoonnummer: |  | | | |  |
| E-mailadres: |  | | | |  |
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| Belangrijk om te weten bij het leggen/opnemen van contact: | | | | | |
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| Leerlingbeschrijving | | | |  | | | | | | | | | | | | | | | |
| IQ | | | |  | | | | | | JA / NEE disharmonisch profiel | | | | | | | | | |
| Beeldvorming  *Opleidingshistorie, reden van speciaal onderwijs, sociale context ; gezin, hobby, interesses enz.* | | | |  | | | | | | | | | | | | | | | |
| Leesniveau *uitgedrukt in leerjaren basisschool* | | | |  | | | | | | | | | | | | | | | |
| Rekenniveau  *uitgedrukt in leerjaren basisschool* | | | |  | | | | | | | | | | | | | | | |
| Sociaal- emotioneel functioneren | | | |  | | | | | | | | | | | | | | | |
| Stage-ervaringen en werkzaamheden  *Duur, omvang, aard van de werkzaamheden en factoren die meer of minder succesvol waren.* | | | |  | | | | | | | | | | | | | | | |
| Technische en/of organisatorische aanpassingen  *Werkplek voorzieningen, aangepast takenpakket e.d.* | | | |  | | | | | | | | | | | | | | | |
| Belemmerende factoren  *Knelpunten bij uitvoering van (on)betaald werk/dagbesteding.* | | | |  | | | | | | | | | | | | | | | |
| Bevorderende factoren  *Oplossingen om te kunnen functioneren in (on)betaald werk/dagbesteding.* | | | |  | | | | | | | | | | | | | | | |
| Aandachtspunten op medisch gebied  *medicatie, allergieën, beperkingen. Alleen beschrijvend, geen diagnoses, wél de gevolgen.* | | | |  | | | | | | | | | | | | | | | |
| Begeleidingsbehoefte  *Kruis de aard van begeleidingsbehoefte aan* | | | | * Leerling heeft *geen* begeleiding nodig * Leerling heeft behoefte aan begeleiding bij eventuele veranderingen en moet kunnen terugvallen op een collega. * Leerling doet werk altijd samen en moet voortdurend terug kunnen vallen op een (begripvolle) collega. * Leerling heeft een andere vorm van begeleiding nodig,  nl: | | | | | | | | | | | | | | | |
| Begeleidingsacceptatie  *Ziet betrokkene het nut en doel van begeleiding en staat daar voor open?* | | | | q niet | | | | | q meer niet dan wel | | | | q meer wel dan niet | | | | q wel | | |
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| Basale werknemersvaardigheden | | | | | | |  | | | |  | | | |  | | |  | |
|  | | | | | | | Ja | | | | Ja, met  begeleiding | | | | Nee, mogelijk op termijn | | | Nee, nimmer | |
| begrijpt instructies | | | | | | |  | | | |  | | | |  | | |  | |
| voert instructies uit | | | | | | |  | | | |  | | | |  | | |  | |
| onthoudt instructies | | | | | | |  | | | |  | | | |  | | |  | |
| komt afspraken na | | | | | | |  | | | |  | | | |  | | |  | |
| houdt aandacht vast | | | | | | |  | | | |  | | | |  | | |  | |
| overlegt en werkt samen | | | | | | |  | | | |  | | | |  | | |  | |
| gaat goed om met veranderingen/problemen | | | | | | |  | | | |  | | | |  | | |  | |
| gaat goed om met kritiek | | | | | | |  | | | |  | | | |  | | |  | |
| heeft regulier handelings-tempo/werktempo | | | | | | |  | | | |  | | | |  | | |  | |
| is gedreven en ambitieus | | | | | | |  | | | |  | | | |  | | |  | |
| levert kwalitatief werk | | | | | | |  | | | |  | | | |  | | |  | |
| vraagt op juiste manier hulp | | | | | | |  | | | |  | | | |  | | |  | |
| werkt veilig | | | | | | |  | | | |  | | | |  | | |  | |
| is zelfstandig | | | | | | |  | | | |  | | | |  | | |  | |
| Eventuele toelichting op bovenstaande punten | | | | | | | | | | | | | | | | | | | |
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| Betrokkenen bij de begeleiding van de leerling  *jeugdzorg, maatschappelijk werk, gemeente, UWV, RBL, enz.* | | | | | | | | | | | | | | | | | | | |
| Naam: | | |  | | | | | | | | | | | | | | | | |
| Namens organisatie: | | |  | | | | | | | | | | | | | | | | |
| Telefoonnummer: | | |  | | | | | | | | | | | | | | | | |
| E-mailadres: | | |  | | | | | | | | | | | | | | | | |
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| Naam: | | |  | | | | | | | | | | | | | | | | |
| Namens organisatie: | | |  | | | | | | | | | | | | | | | | |
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| Naam: | | |  | | | | | | | | | | | | | | | | |
| Namens organisatie: | | |  | | | | | | | | | | | | | | | | |
| Telefoonnummer: | | |  | | | | | | | | | | | | | | | | |
| E-mailadres: | | |  | | | | | | | | | | | | | | | | |
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| Indicaties en maatregelen - *Vul in het betreffende vakje de datum in* | | | | | | | | | | | | | | | | | | | |
|  | | | | | | geadviseerd | | | | aangevraagd | | | | toegekend | | | afgewezen | | |
| Dagbesteding | | | | | |  | | | |  | | | |  | | |  | | |
| Beschut werk | | | | | |  | | | |  | | | |  | | |  | | |
| WAJONG | | | | | |  | | | |  | | | |  | | |  | | |
| (forfaitaire) loonkostensubsidie | | | | | |  | | | |  | | | |  | | |  | | |
| verklaring doelgroepregister | | | | | |  | | | |  | | | |  | | |  | | |
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| In bezit van onderstaande diploma’s en/of certificaat: | | | | | | | | | | | | | | | | | | | |
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| toekomstvisie | | | | |  | | | | | | | | |  | | | | | |
| Van leerling zelf | | | | |  | | | | | | | | | | | | | | |
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| Advies school | | | | | direct na school | | | | | | | | | op termijn | | | | | |
|  | | | | | * Werk * Werk + vervolgonderwijs * Vervolgonderwijs * Beschut werk * Dagbesteding | | | | | | | | | * Werk * Werk + vervolgonderwijs * Vervolgonderwijs * Beschut werk * Dagbesteding | | | | | |
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| Ondertekening - school | | | | | | | | | | | | | | | | | | | |
| Transitieplan opgesteld/vastgesteld door | | | | | | | | | | | | | | | | | | | |
| Naam: | | | | | |  | | | | | | | | | | | | | |
| Functie: | | | | | |  | | | | | | | | | | | | | |
| Datum: | | | | | |  | | | | | | | | | | | | | |
| Handtekening: | | | | | |  | | | | | | | | | | | | | |
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| Ondertekening – ouders/leerling | | | | | | | | | | | | | | | | | | | |
| Naam: | | | | | |  | | | | | | | | | | | | | |
| Relatie tot (minderjarige) leerling: (ouder, voogd, enz) | | | | | |  | | | | | | | | | | | | | |
| Datum: | | | | | |  | | | | | | | | | | | | | |
| Handtekening: | | | | | |  | | | | | | | | | | | | | |
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| **Bijlage(n)** | | | | | | | | | | | | | | | | | | | |
|  | | Stage verslag(en) | | | | | | | | | | | | | | | | | |
|  | | Indicatie stellingen | | | | | | | | | | | | | | | | | |
|  | | Psychologisch /psychodiagnostisch onderzoek | | | | | | | | | | | | | | | | | |
|  | | Medische informatie | | | | | | | | | | | | | | | | | |
|  | | Curriculum Vitae (CV) | | | | | | | | | | | | | | | | | |
|  | | Ontwikkelingsperspectiefplan (OPP) | | | | | | | | | | | | | | | | | |
|  | | ToeLaatbaarheidsverklaring (TLV) | | | | | | | | | | | | | | | | | |
|  | | Toestemmingsverklaring ouders | | | | | | | | | | | | | | | | | |
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| **opmerkingen** | | | | | | | | | | | | | | | | | | | |
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