**We Work for Everyone**

**Provider Information, Services Offered and Pricing Schedule for 2021-23**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of organisation** |  | | | |
| **Contact name** |  | | | |
| **Email address** |  | | | |
| **Address** |  | | | |
| **Telephone number** |  | | | |
| **Website** |  | | | |
| **Category of provision and geographical area**  (mark ‘x’ in all that apply) | **Bristol** | **North Somerset** | **BANES** | **South Gloucester** |
|  |  |  |  |  |
| **Description of your service**  **(500 words maximum)** |  | | | |
| **List any qualifications,** NVQ**’s accreditations offered etc.** | **1** | | | |
| **2** | | | |
| **3** | | | |
| **4** | | | |
| **Periods of year operating (e.g. all year round, part time, school term-times)** | **Operating hours** | | |  |
| **Please indicate here the needs of individual’s that you can meet**  **(mark ‘x’ in all that apply)** | Social, emotional and mental health needs | | |  |
| Speech, language and communication difficulties | | |  |
| Moderate learning difficulty (MLD) | | |  |
| Specific learning difficulty (e.g. dyslexia) | | |  |
| Severe learning difficulty (SLD) | | |  |
| Autism without MLD or SLD | | |  |
| Autism with MLD or SLD | | |  |
| Profound and multiple leaning difficulty | | |  |
| Physical disability | | |  |
| Visual impairment | | |  |
| Hearing impairment | | |  |
| Multisensory impairment | | |  |
| Other (please specify) | | |  |
| **Description of the governance structure of your organisation on a local level, and if applicable, national level (250 words maximum)** |  | | | |
| **List any awarding bodies your organisation is registered with** |  | | | |

**Services offered and pricing schedule for 2021-23**

We want to enable providers to be flexible and responsive, so we do not expect you to include details of all programmes you offer or may offer in future. The information provided below is to give buyers an indication of the type of programme you offer and your prices. You may wish to provide a link to your website and or contact details for buyers to find out more.

|  |  |  |  |
| --- | --- | --- | --- |
| **Services, Qualifications / Training Support** | **Name of programme** | **Brief description of programme including hours per week (provide weblink for further information / contact details if different from above)** | **Indicative cost per person per day/week/term as appropriate.** |
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