



Commitment to Relationships and Sexual Health Education Recognition Awards Essex Application Form

SILVER

Silver Status Application

Name of Educational Establishment:

District of Educational Establishment:

Educational Establishment Type:

PSHE Lead / Contact Name and Job Title:

Email Address:

Telephone Number:

School Address:

Name of Healthy School Lead:

Please attach any evidence below that supports this application, please ensure this does not include any personal data. If this application is for a Bronze or Silver Application, please ensure this includes name and date of RSHE session attended.

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Name and dates of 3 RSHE Sessions Attended (one to include Delivering RSHE 4 hour session):

- 1
- 2
- 3

Please provide evidence that you have provided opportunities for student voice relating to RSHE.

Please provide evidence to show how you have made additional RSHE related information accessible to your pupils

If an educational establishment fulfils the criteria for an award, it is their responsibility to complete this recognition application form and return this to:

 provide.eshsoutreachtteam@nhs.net

Applications will be reviewed at the end of every school term.

For any queries, please contact us on  **0300 373 3421**