 **** Fersiwn: 02/07/2021

**Cais i adolygu Cynllun Datblygu Unigol**

cyn y dyddiad adolygu arfaethedig

***Request to review an Individual Development Plan***

*before the proposed review date*

**Gwybodaeth am y Plentyn neu’r Person Ifanc / *Information about the Child or Young Person***

|  |  |  |  |
| --- | --- | --- | --- |
| Enw Llawn / *Full Name*: | > | D.G. / *DoB*: | > |

|  |  |  |  |
| --- | --- | --- | --- |
| Cyfeiriad Cartref /  *Home Address* : | > | Cod Post /  *Post code :* | > |
| Rhif ffôn / *Phone number*: | > | E bost / *Email*: | > |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Enw Rhiant neu Gwarcheidwad  */ Parent or Guardian’s Name*: | > | | Cyfrifodeb Rhiant  / *Parental Resposibility*: | | > |
| Rhif ffôn / *Phone number*: | > | E bost / *Email*: | | > | |
| Enw Rhiant neu Gwarcheidwad  */ Parent or Guardian’s Name*: | > | | Cyfrifodeb Rhiant  / *Parental Resposibility*: | | > |
| Rhif ffôn / *Phone number* : | > | E bost / *Email*: | | > | |

**Pam cyflwyno cais i adolygu / Why submit a request to review**

Ticiwch yr isod os yn berthnasol / *Tick the below if relevant*

|  |  |
| --- | --- |
| Amgylchiadau wedi newid yn sylweddol / *There has been a significant change in circumstances* : |  |
| Gwybodaeth newydd wedi dod i’r amlwg / *New information has come to light* : |  |
| Deilliant arfaethedig wedi’i gyflawni / *Intended outcome has been achieved* : |  |
| Wedi dod i’r amlwg na fydd deilliant arfaethedig yn cael ei gyflawni /  *It has become obvious that an intended outcome will not be achieved :* |  |
| Credir nad oes gan y plentyn / person ifanc ADY bellach, ac felly nad oes angen CDU arno /  *It is no longer felt that the child or young person has ALN and, therefore, no longer requires an IDP* : |  |
| Rheswm arall (gofynnir i chi nodi manylion isod) / *Another reason (please note details below) :* |  |
| > | |

Gweithredir o fewn amserlen statudol o 7 wythnos neu 35 diwrnod ysgol / tymor o’r dyddiad cael cais am adolygiad.

*A statutory timescale of 7 weeks or 35 school / term time days from the date of request for review will be followed.*

**Gwybodaeth a Thystiolaeth / *Information and Evidence***

Dewiswch pa dystiolaeth a atodir gyda’r ffurflen gais gan gynnwys crynodeb a ticio’r blwch os yn berthnasol

*/ Select which evidence is attached to the request form including a summary and ticking the box if relevant*

|  |  |
| --- | --- |
| Gwybodaeth gan Riant neu Warchodwr / *Information from the Parent or Guardian* : |  |
| > | |
| Tystiolaeth monitro Darpariaeth Ddysgu Ychwanegol / *Additional Learning Provision monitoring evidence* : |  |
| > | |
| Asesiad neu rhestr wirio (e.e. Proffil Cryno Cyfnod Sylfaen, Proffil Tracio Blynyddoedd Cynnar, WellComm)  / *Assessment or checklist (e.g. Foundation Phase Profile, Early Years Tracking Profile, WellComm*) : |  |
| > | |
| Adroddiad gan ... / *Report from ....* : |  |
| > | |
| Arall / *Other* *....* : |  |
| > | |

**Gwybodaeth am y Cyfeirydd – Os yw’r ffurflen hon yn cael ei llenwi gan berson sydd ddim**

**â chyfrifoldeb rhiant am y plentyn**

***Information about the Referrer - If the form is completed by a person who does not have***

***the parental responsibility for the child***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Enw’r cyfeirydd /  *Name of Referrer*: | > | | Perthynas i’r plentyn / *Relationship to Child* : | | | > | |
| Rhif ffôn / *Phone number*: | > | | E bost / *Email*: | | > | | |
| Gwasanaeth (os yn berthnasol)  / Service (if relevant): | | > | | | | | |
| Cyfeiriad / *Address*: | | > | | Cod Post/*Post code:* | | | > |

|  |  |  |  |
| --- | --- | --- | --- |
| Llofnod /  *Signature*: | > | Dyddiad  / *Date*: | > |

Os ydych chi’n dymuno cefnogaeth i lenwi’r ffurflen, os gwelwch yn dda cysylltwch â Gwasanaeth ADYaCh Gwynedd a Môn

*If you would like support in completing the form, please contact Gwynedd and Anglesey ALN and Inclusion Service.*

I’w ddychwelyd i / *Return to*: **GweinyddolADYaCH@Gwynedd.llyw.cymru**

Pan nad yw’n bosib anfon y ffurflen yn electronig, anfonwch y ffurflen drwy’r post:

*W**here sending the form electronically is not possible, please return the form by post:*

**Gwasanaeth ADYaCh**

**Pencadlys Cyngor Gwynedd**

**Stryd y Castell**

**Caernarfon**

**LL55 1SE**

Am wybodaeth ar sut mae Cyngor Gwynedd yn trin data personol, gallwch weld datganiad preifatrwydd ar y wefan: **www.gwynedd.llyw.cymru**

*For information as to how Gwynedd Council handles personal data, please see the Privacy Notices on the website:* **www.gwynedd.llyw.cymru**