 **Application for Extension to the AYE –**

**Line Manager/Supervising Social Worker Report Form**

(Form Ref AYE3)

This form should accompany ‘Application for Extension’ form AYE2 when ‘reasons of competence’ are stated for requesting an extension to the AYE.

|  |  |  |
| --- | --- | --- |
| **AYE Line Manager Report and Action Plan** | | |
| **Detail Standard(s) Which Have Not Yet**  **Been Achieved** | **Plan to Achieve Required Standard** | **Timescale** |
| ………………………………………………… | …………………………………………………………………….. | ………………………….……… |
| ………………………………………………… | …………………………………………………………………….. | ………………………….……… |
| ………………………………………………… | …………………………………………………………………….. | ………………………….……… |
| ………………………………………………… | …………………………………………………………………….. | ………………………….……… |
| ………………………………………………… | …………………………………………………………………….. | ………………………….……… |
| ………………………………………………… | …………………………………………………………………….. | ………………………….……… |
| ………………………………………………… | …………………………………………………………………….. | ………………………….……… |
| ………………………………………………… | …………………………………………………………………….. | ………………………….……… |
| ………………………………………………… | …………………………………………………………………….. | ………………………….……… |
| ………………………………………………… | …………………………………………………………………….. | ………………………….……... |
| ………………………………………………… | …………………………………………………………………….. | ………………………….……… |
| ………………………………………………… | …………………………………………………………………….. | ………………………….……… |

(Form ref AYE3- V3- 2022) (Page 1 of 2)

31

|  |  |  |
| --- | --- | --- |
| **Detail Standard(s) Which Have Not Yet**  **Been Achieved** | **Plan to Achieve Required Standard** | **Timescale** |
| ………………………………………………… | …………………………………………………………………….. | ………………………….…. |
| ………………………………………………… | …………………………………………………………………….. | ………………………….…. |
| ………………………………………………… | …………………………………………………………………….. | ………………………….…. |
| ………………………………………………… | …………………………………………………………………….. | ………………………….…. |
| ………………………………………………… | …………………………………………………………………….. | ………………………….…. |
| ………………………………………………… | …………………………………………………………………….. | ………………………….…. |
| ………………………………………………… | …………………………………………………………………….. | ………………………….…. |
| ………………………………………………… | …………………………………………………………………….. | ………………………….…. |
| ………………………………………………… | …………………………………………………………………….. | ………………………….…. |
| ………………………………………………… | …………………………………………………………………….. | ………………………….…. |
| ………………………………………………… | …………………………………………………………………….. | ………………………….…. |

|  |
| --- |
| **Registrant signature: ………………………………………………………………………………………………. Date: …………………………** |
| **Line manager/supervising social worker name:** (Please Print)**: ……………………………………………………………………………….** |
| **Line manager/supervising social worker signature: ………………………………………………………… Date: …………………………** |

Form ref AYE3- V3- 2022) (Page 2 of 2)

32