

INDEPENDENT LIVING AGENCY

DISABILITY EMPLOYMENT SUPPORT SERVICE

Service User's Contact Details

Full Name Address			
DOB Email Phone		NI Number	
		Mobile	

Referrer's Contact Details

Name Address			
Position Email Phone			
		Mobile	

Please tick what support is required

<input type="checkbox"/> Housing Support	<input type="checkbox"/> Homeless Support
<input type="checkbox"/> Housing Benefit	<input type="checkbox"/> Re-Housing
<input type="checkbox"/> Rent Arrears	<input type="checkbox"/> Temporary Accommodation
<input type="checkbox"/> Rent Shortfall	<input type="checkbox"/> Budgeting
<input type="checkbox"/> Council Tax	<input type="checkbox"/> Other (Benefit Check and Search for college)
	<input type="checkbox"/> Blitz Cleaning

Referrer's Request Notes

Is it safe for a lonely support worker to work with the service user? Yes No

Any other risks the support team should be aware of:

Other Agencies Involved

Other Support Needed Yes No

Does the services user need an interpreter

If yes what language

Has the service user got any impairments

Please give more information:

Does the service user have access to public funds?

Is the service user in receipt of benefit

If yes please select which one

- | | | |
|------------------------------|--------------------------------------|--------------------------------|
| <input type="checkbox"/> PIP | <input type="checkbox"/> IS | <input type="checkbox"/> Other |
| <input type="checkbox"/> UC | <input type="checkbox"/> ESA | |
| <input type="checkbox"/> DLA | <input type="checkbox"/> Tax Credits | |

Service User 's Ethnicity

Asian/Asian British		Mixed/Multiple Ethnic Group	
<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>	White and Black Caribbean
<input type="checkbox"/>	Chinese	<input type="checkbox"/>	White and Black African
<input type="checkbox"/>	Indian	<input type="checkbox"/>	White and Asian
<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	Other Mixed
Black/African/Caribbean/Black British		White	
<input type="checkbox"/>	African	<input type="checkbox"/>	British
<input type="checkbox"/>	Caribbean	<input type="checkbox"/>	Irish
<input type="checkbox"/>	Black British	<input type="checkbox"/>	Gypsy or Irish Traveller
Other Ethnic Group		<input type="checkbox"/>	Other
<input type="checkbox"/>	Arab		
<input type="checkbox"/>	Any other group		

Gender

Sexual Orientation

<input type="checkbox"/>	Man	<input type="checkbox"/>	Straight /Heterosexual
<input type="checkbox"/>	Woman	<input type="checkbox"/>	Gay or Lesbian
<input type="checkbox"/>	_____ (fill in the blank)	<input type="checkbox"/>	Bisexual
<input type="checkbox"/>	Prefer not to disclose	<input type="checkbox"/>	Prefer to self-describe
		<input type="checkbox"/>	Prefer not to say

Supporting documents

“Giving back choice and control since 1996”

Registered charity No. 1064099

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