

Telford & Wrekin

**Young Carers Service**

**SELF REFERRAL AND INITIAL INFORMATION RECORD**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of person making referral: | | Date of Referral: | | | |
| Relationship to the Young Carer: | | | | | |
| **Child/Young Person’s Details** | | | | | |
| Family Name |  | | | | |
| Forename |  | | Gender: Male ⬜ Female ⬜ | | |
| Address |  | | | | |
| Postcode |  | | | | |
| Telephone |  | | | | |
| Mobile |  | | | | |
| Date of Birth |  | | | | |
| Age |  | | | | |
| School attended |  | | | | |
| **Details of Person/People Young Carer is Caring for** | | | | | |
| Name |  | | | Date of Birth |  |
| Relationship to Young Carer |  | | | | |
| Illness/Disability |  | | | | |
| Any further information |  | | | | |
| Completed by |  | | | | |
| Date completed |  | | | | |

**PLEASE RETURN TO** [**info@telfordandwrekinyoungcarers.org.uk**](mailto:info@telfordandwrekinyoungcarers.org.uk) **or call 01952 240209. Please adhere to GDPR guidelines and password protect this document, sending password for access in separate email to the same email address.**

**Instructions for password protection:**

**PC: File – Info – Protect Document – Encrypt with Password**

**Mac: Word menu – Preferences – Personal Settings – Security – Password to open**