



You do not have to answer all the questions but it helps us help you if you choose to do so.

Date of Referral:	
Have you read and do you accept our confidentiality statement & GDPR policy ?	YN
Do you consent to sharing information with us?	$Y \square N \square$
Which of the following do you have access to?	
☐ Functional smart phone ☐ Laptop/tablet ☐ Email	
Do you have a sufficient data plan or wifi?	Y□N□
YOUR DETAILS	
First Name:	
Surname:	
Date of Birth:	
Address (inc. postcode):	
Telephone number:	
Email address:	
FAMILY/EMERGENCY CONTACT DETAILS	
First Name:	
Surname:	
Relationship to you:	
Address (inc. postcode):	
Telephone number:	
Email address:	
YOUR HEALTH	_
Psychological difficulties:	
Physical difficulties or disabilities:	
Medication:	





Your mental health legal status:
☐ Care Act
☐ Deprivation of Liberty Safeguards
☐ Mental Capacity Act
☐ Mental Health Act Section 2
☐ Mental Health Act Section 3
☐ Mental Health Act Community Treatment Order
☐ Mental Health Act Other (Please specify):
☐ Safeguarding (Adults)
☐ Safeguarding (Children)
If you have any involvement with the following, please provide their name and contact details:
Community Mental Health Team
<u>Psychiatrist</u>
Social Services
<u>GP</u>
Housing Manager
Do you have any history of risk to self or others? If yes, please provide details:
(if you answer Yes it does not mean you will not get help)
YOUR SITUATION
Please give us an overview of your situation:





What do you hope to achieve with HoardingUK's support?
Is there anything else you'd like to inform us about?
Are you at risk of homelessness or is there any other legal or environmental threat we should know about? Are there any relevant dates?
What is your housing situation?
 ☐ Home owner ☐ Local authority tenant ☐ Private tenant ☐ Sheltered accommodation ☐ Living with friends or family ☐ Temporary housing ☐ Other
Are you up to date with all your priority bills?
If applicable, has a gas check on your property been successfully completed in the last 12 months?

Thank you for completing our referral form!

Please note there is a waiting list, starting from the time this form is returned to us, so please be patient and we will help you as soon as we are able.