



HAVERING MIND
HARROW LODGE HOUSE
HORNCHURCH ROAD
HORNCHURCH RM11 1JU
TELEPHONE / FAX 01708 457040
Email: havmindhq@hotmail.com



INVESTOR IN PEOPLE

CARERS SUPPORT REFERRAL FORM

Carers Name..... **D.O.B.**.....
Address.....
.....**Post Code**.....
Telephone No..... **Email**.....
Are you Carer registered in Havering? Yes/No (Delete as appropriate)
Have you had a Carers Assessment? Yes/No (Delete as appropriate)
Date of assessment.....

Cared For
Name..... **D.O.B.**.....
Relationship to Carer.....
Address.....
.....**Post Code**.....
Telephone No..... **Email**.....

Referrer's Name..... **Title**.....
Self Referral Yes/No
Position.....
Address.....
.....**Post Code**.....
Telephone No..... **Email**.....

Data Protection

We need to know if you are happy for Havering Mind to pass on your contact details to other organisations so they can contact you about events and training they are organising.

Please tick one of the following below

- ◇ I am happy for Havering Mind to pass on my contact details
- ◇ Havering Mind must get my agreement before passing on my contact details to other organisations
- ◇ Do not pass my details on to any other organisation

Answering this question will help us make sure we are reaching carers from all cultural backgrounds

Ethnic Origin

- | | | |
|--------------------------|--------------------------|--|
| ◇ White British | ◇ Asian British | ◇ Chinese |
| ◇ White Irish | ◇ Asian Indian | ◇ Mixed White /Black Caribbean |
| ◇ White other background | ◇ Asian Pakistani | ◇ Mixed White / Black African |
| ◇ Black British | ◇ Asian Bangladeshi | ◇ Other group (please specify) |
| ◇ Black Caribbean | ◇ Mixed White / Asian | |
| ◇ Black Africa | ◇ Mixed other background | ◇ I prefer not to answer this question |

SIGNATURE OF REFERRER.....DATE.....

Havering Mind is funded by the London Borough of Havering, Havering Primary Care Trust and from voluntary contributions
Company No. 4184862 Registered Charity No. 1108470