

**Sandy Bear Children’s Bereavement Charity**

**Referral Form**

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| **Child/young person’s details** | |
| Family name: | Forenames: |
| Date of Birth: | Preferred name: |
| Gender:  Male  Female  Prefer not to say | Age: |
| Parent/carer’s name: | Landline: |
| Email: | Mobile: |
| Ethnicity: | Religion: |
| Current address:  Postcode: | County: |
| School attended: | Preferred language: |
| Parents preferred language: | Reading language: |
| Do you have a Social Worker? | Is this child/young person a looked after child? |
| GP’s name, surgery and contact number: | |
| Disability / Medical Condition: | |

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| **1.Who has died?** |
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| **2.What date did their special person die?** |
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| **3. What was the cause of death?** |
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| **4. What is your relationship to the child/young person?** |
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| **5. What is the biggest worry on this child/young person?** |
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| **Household Details:** |

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| --- | --- | --- | --- |
| Name | Date of birth/ Age | Relationship to child/young person | Parental responsibility |
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| **Significant others not living at the family home** |

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| --- | --- | --- | --- |
| Name | Date of birth/ Age | Relationship to child/young person | Gender |
|  |  |  |  |
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| **Professionals Involved** |

|  |  |
| --- | --- |
| 1. Name |  |
| Role |  |
| Organisation |  |
| Email address |  |
| 1. Name |  |
| Role |  |
| Organisation |  |
| Email address |  |

|  |  |
| --- | --- |
| **Referrer Details** | |
| Name: | Date of referral: |
| Address: | |
| Telephone number: | |
| Email address: | |
| Referrer signature: | |

**Data protection**

While providing support from Sandy Bear Children’s Bereavement Charity and monitoring and evaluating your family’s needs, we collect, hold and process certain personal and sensitive information about you. We treat this information as strictly confidential and only release it to yourself as parent/carer with parental responsibility. This information may be used anonymously so that we can plan services. We also enter demographics on to our computer system.

* To be able to do this, we require your explicit consent (by ticking the box below).
* We collect only the necessary and relevant personal data to enable us to fulfil our obligations to you and Sandy Bear Children’s Bereavement Charity. We operate according to very strict internal guidelines, and always ensure that your data is processed fairly, confidentially, securely and lawfully.
* We collect, store and process data in accordance with all applicable data protection legislation, including the UK General Data Protection Regulation.

**Please tick to confirm your consent**  
I understand and accept the collection and processing of personal data by Sandy Bear Children’s Bereavement Charity.

Parent/guardian signature …....................................................................................................