**Referral form**

|  |  |  |  |
| --- | --- | --- | --- |
| *Working for Carers is a free service to support into volunteering, training and employment Carers who are not working, 25 and over, living in London. The project is jointly funded by the European Social Fund and the National Lottery Community Fund.*  *Please complete the referral form and send via email at* [workingforcarers@carerslewisham.org.uk](mailto:workingforcarers@carerslewisham.org.uk) *We will send a confirmation email of receipt.* | | | |
| **Referring Agency Details** | | | |
| Name: |  | | |
| Role: |  | | |
| Organisation: |  | | |
| Phone number: |  | | |
| Email: |  | | |
| *I confirm, to the best of my knowledge, that the carer is not in any form of paid work at the moment*  *Signature………………………………………………………..* | | | |
| **Carer Details** | | | |
| Name |  | | |
| Date of Birth |  | | |
| Telephone number |  | | |
| Email |  | | |
| Postcode |  | | |
| National Insurance Number |  | | |
| *I give my permission for my personal details to be shared with Working for Carers in accordance with the new General Data Protection Regulation (GDPR).*  *Signature:*  *We will never sell, communicate, or divulge your data to any marketing/advertising agency and*  *we promise to keep your details safe and secure.* | | | |
| **Eligibility:** | | | |
| Type of ID\* |  | Copy attached | Yes No |
| For internal use only: Date received \_\_\_\_\_\_\_\_\_\_\_\_ First contact made \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |

*\*= Passport or British birth certificate*