|  |  |  |
| --- | --- | --- |
| **Please make sure the whole form is completed before the referral is sent, particularly the section on reason for referral.**  This form is for use by case/support workers. Your client may be eligible for the Financial Support Line Casework Service if they:   * have debts and require debt advice and * have experienced or are experiencing domestic or economic abuse | | |
| Client’s details | | |
| **Client’s name** | Click here to enter text | |
| **Client’s mobile number** | Click here to enter text | |
| **Safe to leave messages?** | Yes | No |
| **Should we withhold our number?** | Yes | No |
| **Is it safe to send a text?** | Yes | No |
| **Best time to contact?** | Click here to enter text | |
| **Client’s address** | Click here to enter text | |
| **Client’s email (if safe)** | Click here to enter text | |
| **Has client been impacted by their own or someone else’s gambling?** | Yes  No | |

## Perpetrator’s name and relationship to client

|  |
| --- |
| This is for **conflict-of-interest** purposes only and not requirement to submit the referral form |
| Click here to enter text |

## Client’s vulnerabilities

|  |
| --- |
| Please include any **risk** **issues**, for instance still living with perpetrator. If a **risk assessment** has been completed, please attach a copy. |
| Click here to enter text |

## Referrer’s details

|  |  |
| --- | --- |
| **Referrer’s name** | Click here to enter text |
| **Referrer’s organisation** | Click here to enter text |
| **Referrer’s contact** | Click here to enter text |
| **Explicit Consent** | Please confirm that client has given explicit consent that their information can be shared by the referrer |

## Reason for referral

**Please indicate if the client owes debts to any of these named creditors. If the creditor is not listed here, please specify in the section below and include details of any debt.**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  | | --- | --- | --- | | Cabot Financial |  |  | | Mortimer Clarke Solicitor |  |  | | Scottish Widows |  |  | | Nationwide |  |  | | PRA |  |  | | |  |  |  | | --- | --- | --- | | Lloyds |  |  | | Halifax |  |  | | Bank of Scotland |  |  | | MBNA |  |  | | Other |  |  | |

## Debt issues (e.g., other creditors, enforcement action)

|  |
| --- |
| Click here to enter text |
|  |

## Any further information

Click here to enter text