PARAGON
SUPPORTED HOUSING CIC

REFERRAL FORM

All sections of this form must be completed. If for any reason a section cannot be filled out, please state why. Blank sections will not be accepted.

REFERRAL AGENCY DETAILS

Name of Agency:

Referral Agency Contact:

Reason for referral:

Date: ☐☐-☐☐-☐☐☐☐
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APPLICANT'S DETAILS

Name of Applicant:

Gender: Contact Number: DOB:

National Insurance Number:

Ethnic Origin:

Is the individual in receipt of benefits?

NEXT OF KIN'S DETAILS

Full Name:

Relationship to Applicant: Contact Number:

Address:

PREVIOUS ADDRESS HISTORY

Full Address	Duration of Residence	Reason for Leaving

MEDICAL HISTORY

Social Worker/Probation Officer's Details *(or any other relevant professional)*

GP's Name:

GP's Address:

GP's Contact Number:

Mental health history:

Physical health history:

Is the applicant current taking any medication/treatment?

Any other relevant information:

SUPPORT NEEDS

Please provide details of the type and level of support required

RISK ASSESSMENT

Does the applicant have any history of the following	Low/Medium/High	Details
Aggressive behavior	☐ ☐ ☐	
Self-harm/Suicide	☐ ☐ ☐	
Drug or Alcohol misuse	☐ ☐ ☐	
Child protection issues	☐ ☐ ☐	
Sexual Offences	☐ ☐ ☐	
Forensic background	☐ ☐ ☐	
Self-neglect/Neglect of others	☐ ☐ ☐	
Antisocial behavior	☐ ☐ ☐	
Damage to property	☐ ☐ ☐	
Neighborhood problems	☐ ☐ ☐	
Is the applicant at risk of harm from others? If yes please state by whom and provide details	☐ ☐ ☐	
Any other information	☐ ☐ ☐	

By signing this form, you consent to Paragon Supported Housing CIC collecting and processing the personal information you have provided for the purpose of assessing your housing and support needs. You also give permission for Paragon Supported Housing CIC to share relevant information with other housing providers, local authorities, and support or care organisations if Paragon Supported Housing CIC is unable to provide accommodation, or where necessary to facilitate your housing referral and ongoing support.

Your information will be processed in accordance with UK GDPR and the Data Protection Act 2018, kept secure, and used only for legitimate purposes related to your housing and support needs. You have the right to request access to your information, correct any inaccuracies, and withdraw your consent at any time.

☑ Resident has given permission for this information to be shared with 3rd party organisations.

Signature

Dated