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| **PURE Project - Referral Form** |
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| **SECTION 1: Participant Details** |
| First Name(s) |   | Last Name |   |
| Full Address |  | Postcode |  |  |  |  |  |  |  |
| Tel Number/Mobile Number |  |  |  |  |  |  |  |  |  |  |  | E-mail  |   |
| Age |  | Preferred Pronouns  | [ ]  She/Her | [ ]  He/Him | [ ]  They/Them |
| Preferred method of contact | Choose an item. |

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| **SECTION 2: Eligibility** |
| Participants who do not meet criteria 1-3 below are not eligible for the project. By sending in this form and signing section 8, you have declared you meet the following criteria. |
| **I (Organisation/Referee) confirm that the participant named above is:**1. Resident in Birmingham2. Aged 18 or above.3. Has legal right to live/work in the UK for the duration of the project support |

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| **SECTION 4: Barriers to Employment, Education or Training** |
| Do you think you have a barrier to getting a job? |  [ ]  Yes [ ]  No |
| Please tick all that apply to you: |
| [ ]  Alcohol / Substance Misuse | [ ]  Need support to live independently | [ ]  Childcare responsibility |
| [ ]  Basic Skills (including Maths, English, Digital, and ESOL) | [ ]  Life Skills (including confidence, presentation, communication, CV writing) | [ ]  Domestic AbuseDoes the referee consent to being contacted via phone/email?Phone: Yes [ ]  No [ ]  Email: Yes [ ]  No [ ]  |
| [ ]  Pan Disability/Health Condition | [ ]  Social Exclusion (i.e. age) |
| [ ]  Cost of living/Financial issues  | [ ]  Religious/ Cultural restrictions |
| [ ]  Homeless or at the risk of being homeless | [ ]  Offender / Ex-offender (please consent to processing data in Section 8) |
| [ ]  Other (Please Specify) |  |

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| **SECTION 3: Employment Status** |
| **Unemployed:** without work, available for work, and actively seeking work |   |[ ]
| **Inactive:** without work and not actively seeking work at this time due to current circumstances |   |[ ]

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| **SECTION 5: Health Condition or Disability** |
| Do you have a health condition or disability? |  [ ]  Yes [ ]  No (please go to section 6) |
| Please tick all that apply to you: |
| [ ]  Autism spectrum disorder | [ ]  Learning Disability (moderate) | [ ]  Mental health difficulty |
| [ ]  Asperger’s syndrome | [ ]  Learning Disability (severe) | [ ]  Social and emotional difficulties |
| [ ]  Disability affecting mobility | [ ]  Dyslexia | [ ]  Hearing/sensory impairment |
| [ ]  Temporary disability after illness or accident | [ ]  Dyscalculia | [ ]  Vision/sensory impairment |
| [ ]  Profound complex disabilities | [ ]  Speech, language, and communication needs | [ ]  Prefer not to say |
| [ ]  Other (Please Specify) |  |

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| **SECTION 6: How did you hear about PURE?** |
| PURE Presentation[ ]  | Birmingham City Council Website[ ]  | Social Media[ ]  | Social Worker[ ]  | Family/Friend[ ]  | Key Worker[ ]  |
| [ ]  Other (Please Specify) |  |

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| **SECTION 7: What are you seeking to achieve within the PURE project?**Please also include your interests and aspirations i.e. employment, volunteering, CV writing, training courses etc. |
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| **SECTION 8: Certification and Signature** |
| I certify that I consent to this referral onto the PURE Project and that this is a true copy of the original document |
| **Signature** |  |
| **Date** | Click or tap to enter a date.  |
| [ ]  I explicitly consent to the processing of any criminal convictions and offences data relating to me (if relevant) |
| [ ]  I have been given the privacy notice in relation to how my data is used on the project. |

 **Upon completion of form, please email it to** **BirminghamPURE@Birmingham.gov.uk** **and you will receive a response within 5 working days.**