|  |
| --- |
| **Access Progress/Access Data Parents Employability Projects** |
| **External Referral Form** |
|  |
| **Referrer Details** (if self-referring only complete Client Details) |
| **Organisation:** |  | **Contact Name:** |  |
| **Date of Referral:** |  | **Contact Details:** |  |
| **Client Details**  |  |
| **Client Name:** |  | **Gender:** |  |
| **Client Address:** |  | **Postcode:**  | EH |
| **Client Phone No:** |  | **Client e-mail:** |  |
| **Date of Birth:** |  | **N.I. Number:** |  |
| **Does your client want to move into education, training or employment?** | **Yes** | [ ]  | **No** | [ ]  | ⮋ |
| **If ‘No’, why do you think a referral to Access Progress or Access Data would be appropriate for your client?** |
| To maintain the quality of service for clients Access Progress/Access Data reserve the right to decline referrals or refer on to a more appropriate service |
| **Reason for referral and assistance required:** |
|  |
| **What would the client like to get out of our support?:** |
|  |
| **Essential Criteria** *(Must tick three)* |
| [ ]  Parent/Guardian  | [ ]  Unemployed | [ ]  Low Income (Access Data referrals only) |
| [ ]  Living in Edinburgh |  |  |  |
| **Additional Criteria** *(tick all that apply)* |
| [ ]  Lone Parent | [ ] Has a disability  | [ ]  Has a disabled child | [ ]  Aged under 25 |
| [ ]  Has 3 or more children | [ ]  Youngest child under 1 | [ ]  Minority ethnic background/BAME |
|  |
| **Forms can be returned to our administrator at** **mail@accesstoindustry.co.uk** |