

Information for Self Referring Families

All referrals are made on a **Home-Start Camden (HSC)** referral form. We ask you to provide as much information as possible about your situation and to include the name of your health visitor or social worker or any other organisation you are involved with.

We ask for this information so we can provide you with an effective service and find you a suitable volunteer who can offer you the support you need.

From time to time HSC may need to verify important information you have given us on the referral form with other organisations. Should this be the case, we would inform you and assure you that all information we receive will remain confidential within HSC and will not be shared with other agencies without your permission **except in the case of any child protection issues.**

If you are about to complete a Home-Start Camden Referral Form and would like to discuss any of the questions, or need help to complete the form, please ring the Home-Start Camden office on:
020 7424 1603.

FOR SELF REFERRING CLIENTS ONLY

I have read and understood the above policy statement and I give my permission for Home-Start Camden to contact other agencies (if necessary) to verify information provided by me on the Home-Start Referral Form if necessary. A copy of the full version of this document is available on request.

(Please sign and print your name below):

Signed..... Date.....

Please **print** your full name.....