



Advocates: Sylvia Dobinson and Linda Crooke

Want appointment? Tuesday? Wednesday? or Thursday? Please email: BDS.advocate@gmail.com

Referral Form in BSL

Date:	Gender: M / F	Date of Birth:
Name:		
Address:		
Post Code	Form Completed By:	

Doctor: Address:	Tel No. Fax No.
"Advocacy Service" - know how? Deaf Centre / Friend / Internet / Other.. Please circle.	

Telephone Number:
Mobile Number:
E-mail Address:
Want leave message? How?
Hard of Hearing can phone? Text Message? Fax?

Service required: (Tick Service)
Advocacy Volunteering Equipment Audiology Social Groups Training Job Club

Action Carried out by Staff/Volunteers:
Appointment Given Y / N Information Given Y / N Sign Posted Y / N Dealt With Y / N

IF ADVOCACY PASS TO ADVOCATES LINDA / SYLVIA . Anything else ALISON please.

Assessment Date: (Advocacy only)			
Day:	Date:	Time:	Venue:

Completed by Advocates Only AGREEMENT

Client Name _____ No. _____ Agreement Details & Documents _____

- | | | |
|----------|---|--------------------------|
| 1. | Know what "Advocacy " means? | <input type="checkbox"/> |
| 2. | All your private details in Advocacy office safe? | <input type="checkbox"/> |
| 4. | If problem or not sure? Share information with manager? | <input type="checkbox"/> |
| 5. | Been tell all about Advocacy job rule. | <input type="checkbox"/> |
| 6. | Please appointment arrive on time, if problem please text | <input type="checkbox"/> |
| Advocate | Date | Signature |

Date Signature of client

Agreement Action

Summary (ISSUES DISCUSSED FIRST APPOINTMENT, Clients priority order to deal with)

Advocates Name Sylvia Dobinson and Linda Crooke One Signature.....

Client Name NI No. Agreement Date/Documents

Agreed Goal (Action required by when and by whom)

CONSENT

I give permission for Network Circle for Deafness advocacy service to:

1. Talk other person who trust and private.
2. Talk case without me present
3. Ask information from other department
4. You agree above 1,2 and 3? Please Tick

Date:	
Client signature:	Advocates Signature
Print Name:	