



BOURNEMOUTH FLOATING SUPPORT SERVICES COMMON APPLICATION FORM



Applicant Details

First name:		Surname:	
Title:		Date of birth:	
Contact Tel No:		Gender:	
Contact address:		Name/s, age & gender of others living at your address including dependents:	
Postcode:			
Nationality:		Immigration status if applicable:	
Do you have any communication needs you would like us to consider? (including translation requirements)			
Would you like someone to be present at your initial assessment e.g. Social Worker, Carer etc? Please provide details:			

Referrer Details (if you are applying on your own behalf, please leave this blank)

Referrer's name:			
Organisation (if applicable) and postal address:			
Tel No:		E-mail address:	
Length of time applicant known to referrer:		Has applicant consented to this referral?	YES / NO

Housing Status

Is your accommodation at immediate risk? If yes please provide details e.g. rent arrears, notices issued etc.	
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Please tell us about the things that you **need assistance with**. Please tick any of the boxes that you feel apply to you.

	YES	NO	UNSURE
Managing a tenancy			
Paying rent			
Daily living skills/social skills			
Budgeting/paying bills/claiming benefits			
Accessing other services			
Education/training/employment			
Other support needs (please specify)			

The information that you provide in this section will go towards assisting us in working out how best we can help you.

Please tick yes if you have a history of any of the following:		
	YES	NO
Violence or aggression		
Substance misuse		
Sexual offences		
Arson		
Self harm		
Long-term illness		
Mental illness		
Risk of violence from others		

If you ticked yes to any of the above please provide details. Please be as thorough as possible with your answers:

Other agencies or individuals you are working with e.g. Social Worker, CPN:			
NAME	AGENCY OR RELATIONSHIP	ADDRESS/ TEL NO	CAN WE CONTACT FOR FURTHER INFORMATION ABOUT YOU?

Please provide any other details about your personal history you feel may help us in assessing your needs:

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Do you feel you would benefit from support from a specialist service?

	Recommended service to apply to:
Domestic Violence	BCHA service for people experiencing domestic violence
Dementia and memory loss	Rethink
HIV or AIDS	Body Positive Dorset
Refugee	International Care Network (ICN)
Visual Impairment	Bournemouth Society for the Visually Impaired (BSVI)

(Contact details for all providers and services can be found on the final page of this form)

Declaration

I confirm that the information I have given in this form is correct and I accept that the information may be used as a basis for planning future services. In signing this form, I understand and agree that this information can be shared with other agencies and services relating to my application.

Signed (applicant) Date

Print name (applicant)

Referrer's name

Referrer's signature Date

Agency

Data Protection Act 1998

According to the Data Protection Act you have the right to:

- See most of the information Bournemouth Borough Council holds about you on computer; (Bournemouth Borough Council also gives you the right to see written information about you which we do not have on computer.
- Correct any inaccurate or misleading information.
- Ask to be compensated for any damage you may suffer if information is misused.

Under certain circumstances, we may have the right to refuse to show you information. This would be if;

- Disclosure would be likely to carry a risk of serious harm, either physical or mental, to you or someone else, including staff or other professionals.
- Where the release of the information would be likely to affect the prevention or detection of a crime.
- Where information is restricted under the Medical Records Act or Access to Medical Records Act.
- Where information is restricted by legislation in connection with adoption.

BOURNEMOUTH BOROUGH COUNCIL EQUAL OPPORTUNITIES MONITORING FORM

The organisations providing Floating Support are committed to the fair and equal treatment of all applications for services. The following information will help us to monitor the effectiveness of our equal opportunities policy and will not be used as part of the selection process. Completion of this section is voluntary and will not in any way affect your application.

A. Ethnic Origin (please tick ONE from the list of choices below)

WHITE		BLACK OR BLACK BRITISH	
British	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>
Irish	<input type="checkbox"/>	African	<input type="checkbox"/>
Any other white background	<input type="checkbox"/>	Any other black background	<input type="checkbox"/>
White European	<input type="checkbox"/>		
Portuguese	<input type="checkbox"/>		
Eastern European	<input type="checkbox"/>		
MIXED BACKGROUND			
White & Black African	<input type="checkbox"/>	Any other mixed background	<input type="checkbox"/>
White & Black Caribbean	<input type="checkbox"/>		
White & Asian	<input type="checkbox"/>		
ASIAN OR ASIAN BRITISH		CHINESE/ OTHER ETHNIC GROUP	
Indian	<input type="checkbox"/>	Korean	<input type="checkbox"/>
Pakistani	<input type="checkbox"/>	Chinese	<input type="checkbox"/>
Bangladeshi	<input type="checkbox"/>	Other ethnic group	<input type="checkbox"/>
Any other Asian background	<input type="checkbox"/>	Gypsy or Traveller	<input type="checkbox"/>
		Prefer not to say	<input type="checkbox"/>

B. Disability

If you have a disability please provide details here, including whether you are Registered Disabled

FLOATING SUPPORT SERVICES AVAILABLE

This section is to assist you in deciding which provider will be most suitable to send this application to. Contact details can be found below:

Client Group	Provider
Anti-social behaviour (Support provided to families only)	Safer & Stronger Communities
Emergency support for homeless families and individuals or at imminent risk of homelessness	Alabare
Homelessness	Alabare Signpost Care Partnerships
People with Mental Health problems	BCHA Carr-Gomm Futures at Knightstone Richmond Fellowship Signpost Care Partnerships
People with HIV or AIDS	Body Positive Dorset
People experiencing Domestic Violence	BCHA
Ex - Offenders	Signpost Care Partnerships
Prolific and Priority Offenders	Langley House Trust
Young people including those with addictions or mental health problems	Signpost Care Partnerships
Families with support needs	BCHA Safer & Stronger Communities
People with a visual impairment	Bournemouth Society for the Visually Impaired
People with memory loss or Dementia	Rethink
Refugees	International Care Network (ICN)
People with a drug or alcohol problem	BCHA
People in recovery and accessing Aftercare	BCHA
Generic	Alabare BCHA Futures at Knightstone

If you are you related to anyone who works for, or is on the board of the organisation you are applying to please give their name:

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CONTACT DETAILS FOR FLOATING SUPPORT SERVICES

Provider	Address	Tel	Email
Alabare	59-61 Drewitt House, 865 Ringwood Road, Wallisdown, BOURNEMOUTH BH11 8LL	01202 580932	j.estall@alabare.co.uk
BCHA	St Swithuns House, 21 Christchurch Road, Bournemouth, Dorset BH1 3NS	01202 410500	floatingsupport-general@bcha.org.uk
Bournemouth Society for the Visually Impaired (BSVI)	5 Victoria Park Road, Moordown, Bournemouth BH9 2RB	01202 546644	geraldine.bradley@dsl.pipex.com keith.brooks@dsl.pipex.com
Body Positive Dorset	The Princess of Wales House, 24 Lorne Park Road, Bournemouth BH1 1JL	01202 297386	mail@bodypositivedorset.org
Carr-Gomm	52 Portswood Road, Southampton HANTS SO17 2FW	02380 516545	sarah.mackinnon@carr-gomm.org.uk
Futures at Knightstone Housing Association Ltd	129a Commercial Road, Parkstone, Poole BH14 0JD	01202 505540 01202 505480	poole@knightstone.co.uk graham.smith@knightstone.co.uk judith.mortlock@knightstone.co.uk
International Care Network (ICN)	200 Holdenhurst Road, Bournemouth BH8 8AS	01202 301173	j.davies@icn.org.uk
Langley House Trust	35 Palmerston road, Boscombe, Bmouth, BH1 4HN.	0845 6180030	k.shaw@langleyhousetrust.org.uk
Rethink	Discovery Court, 551-553 Wallisdown Road, Poole Dorset BH12 5AG	01202 853155	Beth.gunn@rethink.org
Richmond Fellowship	9 Irving Road, Southbourne, Bournemouth, Dorset BH6 5BG	01202 417971	ella.lacey@richmondfellowship.org.uk
Safer & Stronger Communities	Boscombe Link, 5 Palmerston Road, Bournemouth BH1 4HN	01202 395871	Maria.follan@bournemouth.gov.uk
Signpost Care Partnerships	Signpost House, Sunrise Business Park, Blandford Forum, Dorset, DT11 8SA	01258 484873	jacqui.church@signpost-care.co.uk