

**Self-Referral to Kingston Carers’ Network – Young Adult Carers’ Project**

**Your Details**

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| --- | --- | --- | --- |
| Full name: | | Date of birth: | |
| Address: | | Home telephone:  Mobile telephone:  Email: | |
| Name of your main guardian (if applicable): | | Relationship to you: | |
| Address of main guardian, if different from your address: | | Your main guardian’s:  Home telephone:  Mobile telephone:  Email: | |
| Carer’s School, College or University (if applicable): | | Is your school, college or university aware of your caring situation? (Please tick)  YES  NO  DON’T KNOW | |
| School, College or University contact person (if applicable): | | Contact telephone:  Contact email: | |
| Ethnicity (please tick): | | | |
| *White* |  | *Mixed/Multiple Ethnic Groups* |  |
| English/Welsh/Scottish/Northern Irish/British |  | White and Black Caribbean |  |
| Irish |  | White and Black African |  |
| Gypsy/Roma |  | White and Asian |  |
| Irish Traveller |  | Any other mixed/multiple ethnic background |  |
| Any other White background |  |  |  |
|  |  | *Asian/Asian British* |  |
| *Black/African/Caribbean/Black British* |  | Indian |  |
| African |  | Pakistani |  |
| Caribbean |  | Bangladeshi |  |
| Any other Black/African/Caribbean background |  | Chinese |  |
|  |  | Any other Asian background |  |
| *Other Ethnic Group* |  |  |  |
| Arab |  | Prefer not to say |  |
| Any other ethnic group |  |  |  |

**The person you look after**

|  |  |
| --- | --- |
| Full name: | Date of birth: |
| Address (if different from your address): | Relationship to you: |
| Diagnosis / Nature of condition: | Nature of help you provide: |

**Additional information about you**

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| *Please provide details of any other relevant information about you (e.g. allergies, medication, health needs, access needs)* |

**Additional information – your family circumstances**

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| *Please provide details of any other relevant information about your family context (e.g. who else lives at home, other support currently in place or that has just recently ended)* |

***Please send this form to*** [***yac@kingstoncarers.org.uk***](mailto:yac@kingstoncarers.org.uk) ***or by post to Emma Bell at Kingston Carers’ Network, The Noble Centre, 109a Blagdon Road, New Malden, Surrey, KT3 4BD***