

Application Form

Residential Rehabilitation

Name		Date of birth			
Present address					
Contact no		Nationality			
Email		Gender		Prefer not to say	
Religion/Spirituality		N.I.number			

Married	Single	Separated	Widowed	Divorced	Living with a partner	Civil Partnership	
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Do you have any children?	Yes / No	If yes, what are their ages?	
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Contact details for next of kin (name, address, email, telephone number)	
Relationship to you	

Any legal actions outstanding?	Yes / No	If yes, please give details	
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Details of previous convictions	
Details of probation orders	
Probation officer name, address, telephone number and email	

Have you been in rehabilitation before?	Yes / No	If yes, where and when	
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Which project are you applying for?	Kenward Community		Move On houses		Kenward Lodge		Don't know	
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Application Form

Residential Rehabilitation

What do you hope to achieve during your stay?					
Do you consider yourself to have problems with?	Drugs		Alcohol		Both
Do you have any physical health concerns?	Yes / No	If yes, please specify			
Are you presently taking medication?	Yes / No	If yes, what do you take?			
Do you have any mental health or psychological problems?	Yes / No	If yes, please describe			
Are you under the care of Mental Health services or have you recently been?	Yes / No	If yes, please specify			

Contact details of referring agency and support worker (Name, address, telephone number)			
Date vacancy required			
Have you been formally assessed as needing residential rehabilitation?	Yes / No	If yes, by whom (name and address)	
		Date of assessment	

What is your funding source?	Local authority		Self-Funding		Insurance	
Funding agency details- name, address, telephone number, email (if applicable)						

Where did you hear about our services?	
Other comments	

Do you give us permission to approach funding authorities, your medical practitioner and probation officer, to progress your application, if appropriate?	Yes / No
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Signature		Date	
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For assistance in completing this form, please call Admissions on 01622 812603