

Chatterchums Referral Form

To be completed for a place in the group. When completed please send to: Dawn Bellman, Wharf Children's Centre Coordinator, Wharf Nursery School and Children's Centre, The Eashing Building, Eashing Lane, Godalming Surrey, GU7 2LF.

Name and contact details of referrer:	Agency of referrer or Wharf Date of referral:
Child's name:	Family composition including children's date of birth:
Address: Not known Postcode: Contact number:	First language: Other languages spoken: Any information to help the Centre's staff support the child's needs:
Reason for referral	
Support required	

Other agencies supporting this family
Nursery attended if applicable

Has place been offered?

If answer is yes then enter date of commencement below:

Date :

Data Protection Act 1998 The Wharf Nursery School and Children's Centre (the 'Centre') respects your privacy rights and is committed to ensuring that it protects your details, the information about your dealings with the Centre and other information available to the Centre ('your information'). In accordance with the Data Protection Act 1998, the Centre will use your information, for the purpose of providing support to children, to (a) deal with your requests and administer its functions, (b) meet its statutory obligations, and (c) prevent and detect fraud. The Centre may share your information (but only with the minimum amount of information necessary to do the above and only where it is lawful to do so) with appropriate departments and agencies in accordance with the Multi Agency Information Sharing Protocol (MAISP). Further details, including a copy of the MAISP can found at www.surreycc.gov.uk

Signed parent.....Date.....

Signed referrer.....Date.....

Date of first contact	Outcomes achieved	Date support completed
	Yes No Partially	