



**Derby Childrens Rights Service**  
**Independent Advocacy Referral Form**

<b><u>About the Person making the Referral</u></b>			
<b>Your Name</b>		<b>Your Telephone</b>	
<b>Your relationship to the Young Person</b>		<b>Your email address</b>	
<b>Is the young person aware the referral is being made?</b>		<b>Advocacy Referral Date:</b>	

<b><u>About the Child / Young Person</u></b>			
<b>Name</b>			
<b>Age &amp; Date of Birth</b>			
<b>Person with PR</b>			
<b>Gender</b>			
<b>Ethnicity</b>		<b>Preferred Language</b>	
<b>Does the young person consider themselves disabled?</b>	<b>YES/NO</b>	<b>Details</b>	
<b>Young person's address</b>			
<b>Telephone number</b>			

**Believe in people**

**About the Child / Young Person (continued)**

<p><b>If the Young Person is accommodated, under which order?</b></p>	
<p><b>Please provide details of any other relevant legislation in place?</b></p>	
<p><b>Please provide information about any known risks to the young person or other information we should be aware of.</b></p>	
<p><b>Please provide information that may help with communication, for example, any additional needs, preferred time and place to meet.</b></p>	

**Please provide a brief history and the reason for the referral; please include any relevant meeting dates**

Signed: ..... Date: .....



Please return completed form by secure/encrypted email to:

DCRS.Advocacy@cgl.org.uk

Alternatively post to our office using special delivery mail:

(Please contact 07809 587007 in advance to confirm a member of staff will be available to sign for it)

**Derby Children’s Rights Service Advocacy**

Change Grow Live  
Rm 7, Halliday House  
2 Wilson Street  
Derby  
DE1 1PG

**For CGL use:**

ADVOCACY ACTION PLAN			
<b>Referral eligible?</b>			
<b>Agency signposted to if relevant:</b>		Date:	By:
<b>Allocated to:</b>		Date:	
<b>Referral acknowledged:</b>		Date:	By:
		Date:	By:
<b>Risk Assessed with social services:</b>		Date:	By:

Policies Explained	Signed	Date
<b>Advocacy referral - consent of CYP confirmed by CGL</b>		
<b>Safeguarding Procedure explained by CGL</b>		
<b>Confidentiality, Contact and Information Sharing shared with CYP</b>		
<b>Complaints procedure explained to CYP</b>		