

Stop Adult Services PO Box 26130 Christchurch 8148
► Phone 03 353 0257 ► Email info@stop.org.nz

ADULT SERVICE

Ideation Referral – Self-Referral Form

Date of Referral _____

First Name _____

Surname _____

Preferred First Name _____

Date of Birth _____

Address _____

Age _____

Ethnicity _____

Phone _____

Iwi _____

REASON FOR REFERRAL

Please explain the reasons why you are wishing to be referred to our service. What would you like help with? (we do appreciate this is personal information but it is really helpful for us if you can please try to give as much detail as you can)

Have you been referred to Stop Services previously? Y ☐ N ☐

Date of Referral _____ **Outcome of Referral** _____

OTHER AGENCIES INVOLVED

Are there any other agencies or professionals involved at the moment in connection with your sexual thoughts or behaviours?

Y ☐ N ☐

If yes, please provide details about who is involved:

Are there any other agencies or professionals who have been involved in the past in connection with your sexual thoughts or behaviours?

Y ☐ N ☐

If yes, please provide details:

Please tell us how you found out about our services: (please circle one)

Phone/Helpline

Internet

Email

Organisation: _____

Word of Mouth

Other: _____

PRIVACY ACT

By signing this form, you are giving permission for information to be used for the following purposes

- By staff of the *Stop Adult Service* for the purposes of the service delivery
- In accordance with the Privacy Act 1993, information may be shared with other professionals where it is considered to be in the best interests of the individual concerned and for matters of safety
- Existing information held by the *Stop Adult Service* as a result of earlier consultations may also be used to help provide appropriate services
- Funding agencies may also have access to client's files from time to time for purposes of clinical audits

Please forward your completed referral form to

Manager
Stop Adult Service
PO Box 26130
CHRISTCHURCH 8148
Phone (03) 353 0257
Email: info@stop.org.nz

Signature of client

Date