**External Service Referral Form**

Financial Wellbeing / Financial Counselling

|  |  |
| --- | --- |
| **Date:** |  |
| **Name:** |  |
| **Is this your real name?** | * Yes
* No
 | **Gender:** | * Male
* Female
* Intersex
* Indeterminate
 |
| **Date of Birth:** |  | **Current or former ADF Member** | * Yes
* No
 |
| **Email:** |  | **Mobile:** |  |
| **Current Address:** |  | **Town/Suburb:** |  |
| **Postcode:** |  |
| **I am:** | * Aboriginal
* Torres Strait Islander
* Other
 | * Aboriginal and Torres Strait Islander
* ASSI
* CALD
 |
| **Country of Birth:** |  | **Language spoken at home:** |  |
| **Migration VISA**Year & month arrived |  | **Employment status** | * Parenting
* Caring
* Study F/time P/time
* Unemployed
* Not working & not looking for work
* Paid work F/time P/time
 |
| **Interpreter needed?** | * Yes
* No
 | **Household type** | * Rental
* Mortgage
* Dept of housing
* Caravan
* Living in Retirement Village
* Living with friends
* Homeless
 |
| **Living** **Arrangements**  | * Single with Children
* Single without Children
* Couple
* Couple with Children
 | **Do you identify as having one or more of the following impairments** | * Learning
* mental health
* physical
* Speech
* Not stated
* None
 |

**Referred to whom?**

 Organisation: \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Partners /Support person**

|  |  |
| --- | --- |
| **Name:** |  |
| **Contact Details:** |  |

**Children/Dependent Details**

|  |  |  |
| --- | --- | --- |
| **Child’s Name** | **DOB** | **Gender** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

 **Income Details**

|  |  |  |
| --- | --- | --- |
| Income type | Income Type | Amount |
| Centrelink pension |  |  |
| Disability pension |  |  |
| Family payments |  |  |
| Rent assistance |  |  |
| Maintenance/CSA |  |  |
| Wage |  |  |
| Self-employed |  |  |
| Total |  |  |

**Present Financial matter:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_