|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Mentoring Application Form**  This form is for **individuals** only and should **not** be completed by professional referrers.  A form for referrers can be found in the ‘For Referrers’ section of thedoor.org.uk | | | | | | | | |
| **SECTION A: Details of the person in need of support: Please tick all that apply** | | | | | | | | |
| I’m a Young Person | € | I Have A Social Worker | € | | I’ve experienced the criminal justice system | | | € |
| I’m a Parent/Carer | € | I’m in care/a care leaver | € | | I’m a Refugee / Asylum Seeker | | | € |
|  | | | | | | | | |
| First Name(s): | | | | | | Pronouns: | | |
| Surname: | | | | | | Date of Birth: | | |
| Ethnicity/Nationality: | | | | | | | Sex: | |
| Address:  Postcode: | | | | | | | | |
| Home Phone: | | | | Mobile Phone: | | | | |
| Email: | | | | | | | | |
| School/ College (Where appropriate): | | | | | | | | |
| **Who shall we call to arrange your first meeting?** | | | | | | | | |
| Name: | | | | Number: | | | | |
| Relationship to applicant: | | | | | | | | |
| **Emergency contact details (if different from preferred contact)** | | | | | | | | |
| Name: | | | | Number: | | | | |
| Relationship to applicant: | | | | | | | | |
| **SECTION B: Request For Support Summary** | | | | | | | | |
| Please provide a summary of the support you would like. What are you struggling with at the moment? What’s going on in your life right now? What difference will support make for you? | | | | | | | | |
| **PLEASE TURN OVER** | | | | | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **SECTION C: Other Agencies / Contact With The Door** | | | |
| **Please list details of any other agencies you are currently receiving or pursuing support from:** | | | |
| **Are any other members of your family / household currently receiving support from The Door?** | | | |
| **SECTION D: Declarations** | | | |
| Have you spoken to The Door team about this application? If so to who? | |  | |
|  | | | |
| I understand the need to commit to support and attend all meetings.  I consent to The Door storing and processing my personal information for use in connection with my support, for the safety of myself and others in accordance with Data Protection law.  I understand that it may also be used on an anonymised basis for the purposes of monitoring and improving The Door’s services.    I understand that The Door works with other trusted agencies that also provide individual and family support. If The Door considers it more appropriate for one of these other agencies to support me or my family, I consent to The Door sharing my application for support / referral with this agency.  I understand that The Door will inform me if this is the case.  Signed (Person looking for support) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Parent / Carer if under 13 years)  Name(printed) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Full details can be found at thedoor.org.uk/privacy** | | | |
| **SECTION E: Voluntary Donation** | | | |
| **Support from The Door is free**. As a charity, we rely on donations to keep our service running. If you would like to make a donation visit: **thedoor.org.uk/donate** or call: 01453 756745 **This will in no way affect the support you receive.** | | | |
| **SECTION F: Become a Friend of The Door (Includes 10% discount in our charity shop)** | | | |
| I’d like to be a **‘Friend of The Door’** Please use the contact details provided to register me for regular updates and charity shop discount (I understand that I can opt out at any time) | | | ⃝ |
| **SECTION G: Monitoring** | | | |
| Where did you hear about The Door? |  | | |
| Where did you find this form? |  | | |
| Please return this form by email to **mentoring@thedoor.org.uk** or  by post to **The Door, 44-45 High Street, Stroud, GL51AN** | | | |