



## REFERRAL FORM

**Date of Referral:**

**Personal Information of person attending the farm.**

Name:

Date of Birth:

Gender:

Address:

Postcode:

Phone Number:

Email Address:

**Details of Person Making Referral**

Name:

Relationship to person / Job role:

Phone Number:

Email Address:

**Parent / Guardian Information (if applicable)**

Name:

Relationship to person:

Phone Number:

Email Address:

**Parent / Carer / Support Worker Attending Sessions (if applicable)**

Name:

Relationship to person:

Phone Number:

Email Address:

**Reason for referral**

Please provide a brief description of the reason for referral:

**Special Educational Needs Assessment**

Please state all the details of need.

Please provide any information related to the persons special educational needs. Please also include diagnosis, clinical diagnosis, understanding and cognitive ability, behaviour etc.

### **Current Support and Strategies**

Please outline any current support or strategies in place for the person.

### **SEND / CAREPLAN /CARE ACT ASSESSMENT**

Please list any previous assessments, or evaluations the person has undergone. Copies of assessments and plans must be made available to the farm prior to enrolment. Please attach any other reports you would like to share for example their last EHCP if just left school.

### **Medical Information**

Please provide any relevant medical information about the person, including medical conditions, medications, seizures, allergies, feeding or dietary requirements etc.

**Additional Information**

Please give a brief description of the person's strengths and interests

Any other relevant information or comments you'd like to tell us?

**Funding**

How will the placement be funded?

Is funding in place?

Date funding is available / timescale / what are the next steps?

Educational Information (if the person is a pupil /student):

School Name:

Grade / Year Level:

School representative details (name, position, email / phone number):

**Visit date:**

**Trial day date:**

**Start date:**

**ANY OTHER INFORMATION:**

Please email this form to: [CarneyCarrTherapyFarm@gmail.com](mailto:CarneyCarrTherapyFarm@gmail.com)

Further details can be found on the website: [WWW.CCTherapy.farm](http://WWW.CCTherapy.farm)

If you would like to post the above information please send it to:

CC Therapy Farm

2 Carr Head Farm

New Barn Lane

Rawtenstall

BB4 7AQ

**For all enquiries, please contact Rebecca Carney on 07734781640**