



Incoming Referral form

Inductions are between 9am-4pm Monday to Friday

Email: intake@oranasupport.com.au

No inductions are made after 4pm

Date:	Time:	DOB:	Taken By:
Name:			Alias:
Address:			Gender: M / F / Non-Binary / prefer not to say
Contact Phone:			Sexual Orientation:
Service Required: Accommodation <input type="checkbox"/>		Furniture <input type="checkbox"/> Food <input type="checkbox"/>	
Tenancy Support <input type="checkbox"/>		Other: <input type="checkbox"/>	
Country of Birth:	Year of arrival:		Has own transport: Y / N
Preferred Language:	Interpreter Required: Y/N		
Cultural Identification:			

Referral Details:

Self Referred? Y /N	
Referral Agency:	
Referring Officer:	
Contact Number:	
Signed:	Date:
PLEASE ATTACH ANY CRIMINAL HISTORY , PAROLE CONDITIONS, AVO'S ETC	

Family Member Details

Name	M/ F	DOB	Age	School	Living with?	Relationship

Is this a Domestic Violence issue: Y / N	Physical	Verbal	Emotional
Details			
Currently Homeless?	If so for how long?		
Type of current accommodation: Eg: couch surfing , Temporary accommodation. Etc.			
Do you need help with: Communication Y / N Self Care Y / N Mobility Y / N			

Client History

Have you been in any facilities / Institutions in the past 12 months: eg: Adult correction facility, hospital Details:
Involved in any legal process: Y / N Are you currently on: Probation / Parole / Bond / AVO / Bail Details:
Who does client report to:
History of Aggression or Violence to others: Y / N Details:
Do you have a disability or Physical medical condition Y / N Details:
History of Mental health? Y / N Currently being treated: Y / N Under control: Y / N Diagnosis: Depression / Anxiety / Schitz / Bi-Polar Other:
Does applicant have a Mental Health case manager: Y / N Details:
Self-Injurious behaviour? Y / N
History of drugs? Y / N Currently using? Y / N Details
History with Alcohol? Y / N Currently using? Y / N Details
ADF Member: Y / N

Tenancy history

Have you rented before: Y / N Are you on Tlca: Y / N Details:
Have you applied for social Housing? Y / N
Are you on a NDIS package Y / N
Employed: Y / N Employee income: Y / N
Type of Centrelink Payment:

Crisis Accommodation

Seeking refuge at : Sturt House / Women's Refuge / Bultje St / Talbragar St
Advised client about house rules– Drug and Alcohol Free, Shared housework and unit locked 10:30pm-7:00am—Y / N
Prepared to share a room and house hold chores : Y / N
Open to communal living : Y / N
Willing to engage with staff to resolve your own homelessness : Y / N

Please provide more details of clients situation

Evaluation:

High: If likely to relapse, untreated; likely to be an issue in community house Y / N
Medium: If unlikely to use or relapse; undergoing treatment; no indicators of sharing issues Y / N
Low: if no history: Y / N