# HUME CITY COUNCIL
# Smalltalk Supported Playgroup Referral

**HUME** CITY COUNCIL

**Privacy and Confidentiality**
Hume City Council (Family, Youth and Children) collects information in relation to families and children to provide children services programs and for secondary research purposes.  Council will only collect personal information and health records that are necessary for its functions and activities.  We will not give out information we hold about you without your consent unless otherwise required to do so by law.  You may access your personal information and health records by contacting Hume City Council on 9205 2200.

## SMALLTALK PLAYGROUP PRE REQUISITE INFORMATION

**Has a referral to Smalltalk Playgroup been discussed with the family?**  ☐ Yes  ☐ No

**PLEASE CHOOSE ONE OR MORE ELIGIBILITY CRITERIA FROM THE FOLLOWING:**

- ☐ Holds a Health Care Card or equivalent visa category
- ☐ From a refugee or asylum seeker background
- ☐ Identify as Aboriginal and / or Torres Strait Islander
- ☐ Children are in Kinship Care arrangements
- ☐ Referred from or participating in Enhanced MCH services
- ☐ Known to / referred from Orange Door (formerly Child FIRST) / Child Protection

## REASON FOR REFERRAL

**PLEASE CHOOSE ONE OR MORE OPTIONS BELOW THAT APPLY TO THE FAMILY:**

- ☐ Social Isolation
- ☐ Family Violence
- ☐ Mental Health
- ☐ Concerns about child's play and/or learning
- ☐ Child has or may have additional needs
- ☐ Parenting concerns
- ☐ Other

Please provide additional details:

## REFERRER DETAILS

Referrer Name

Service Provider

Position/Role

Mobile No.                    Email Address

## PARENT/GUARDIAN DETAILS ☐ Mr ☐ Mrs ☐ Ms

| | | | |
|---|---|---|---|
| Family Name | | Given Name | |
| Address | | Postcode | Suburb |
| Date of Birth | | Gender | |
| Mobile No. | | Email Address | |
| Is an interpreter required? | ☐ Yes ☐ No | If so, indicate language: | |

## CHILD DETAILS

**How many children from this family will be attending playgroup?** 1 ☐ 2 ☐ 3 ☐ 4 ☐

**CHILD 1**

| | | | |
|---|---|---|---|
| Family Name | | Given Name | |
| Date of Birth | | Gender | |

**CHILD 2**

| | | | |
|---|---|---|---|
| Family Name | | Given Name | |
| Date of Birth | | Gender | |

**CHILD 3**

| | | | |
|---|---|---|---|
| Family Name | | Given Name | |
| Date of Birth | | Gender | |

**CHILD 4**

| | | | |
|---|---|---|---|
| Family Name | | Given Name | |
| Date of Birth | | Gender | |