** Family Support In to Out Referral Form**

Jigsaw offers intensive community support to families of prisoners in the West Yorkshire area. Families will be assessed and either offered intensive support for up to 1 year or light touch support.

**Date: ……………………………………………… Prison: HMP Leeds **

**Person referring/agency: ……………………………………………Contact no:……………………………**

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| --- |
| **Family member** |
| First name |  | Surname |  |
| Phone number  |  |
| **Prisoner** |
| First name |  | Surname |  |
| Prison No. |  | Wing & Cell No. |  |
| Release date if applicable  |  |  | SO (office use only) | 1 2 3 |
| Length of sentence if applicable |  |
| Status  | Sentenced  Released Remand  |
| Area of residence  | Leeds  Bradford Kirklees  Calderdale  Wakefield  |
| Support Needs(Please Circle)  | Emotional Support Debt, Benefits, Budgeting Relationships Children’s Education Employment/Training ,Education Access to Healthcare Substance Misuse Children’s Well-being |
| Additional information(e.g. other agencies involved) |  |
| Level of support required | Information only  Short term support Ongoing support  |

**For office use:**

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| **Reference No:** |
| **On Data Base:**  | **CNOMIS checked:** |