



**The Prince's Trust Team Programme**  
**Coventry LPU Referral Form-RESTRICTED**

**Section A – The Referral**

<b>Referred by (name)</b>	<b>Collar No / Team / Dept</b>	<b>Contact Number</b>	
<b><u>Referral Details</u></b>			
<b>Name</b>			
<b>Date of Birth</b>			
<b>Gender</b>		<b>Ethnicity [16 + 1 self-classification]</b>	
<b>Home Address</b>			
<b>Home Tel:</b>			
<b>Mobile Tel:</b>			
<b>Health Issues?</b> Yes ( ) No ( )	<b>If yes, please give details</b>		
<b>Offender/Ex Offender?</b> Yes ( ) No ( )	<b>If yes, please give details</b>		
<b>Does the person being referred consent to the referral?</b>	<b>YES / NO</b>		
<b>Any other personal factors to be aware of? [Limitation on dates available; specific M.O. making cohort selection critical]</b>	<b>If yes, please give details</b>		



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## **Section B – The Review**

POST REFERRAL TASK (To be completed by relevant SPOC prior to meeting)	NOTES UPON COMPLETION	COMPLETED?
Has PNC been checked in relation to this referral? If 'YES', outcome?		<input checked="" type="checkbox"/> / <input type="checkbox"/>
Has FLINTS been checked in relation to this referral? If 'YES', outcome?		<input checked="" type="checkbox"/> / <input type="checkbox"/>
Are there any other factors to be considered as part of the suitability assessment / risk assessment?		<input checked="" type="checkbox"/> / <input type="checkbox"/>
MH Background check completed? (Please contact PC Sweet @ Partnerships to complete)		<input checked="" type="checkbox"/> / <input type="checkbox"/>

**Self Defined Ethnicity (SDE) Codes**

**Asian or British Asian (A)**

- A1 Indian
- A2 Pakistani
- A3 Bangladeshi
- A9 Any other Asian background

**Black or Black British (B)**

- B1 Caribbean
- B2 African
- B9 Any other Black background

**Mixed (M)**

- M1 White and Black Caribbean
- M2 White and Black African
- M3 White and Asian
- M9 Any other mixed background

**Chinese or other Ethnic Group (O)**

- O1 Chinese
- O9 Any other ethnic group

**White (W)**

- W1 British
- W2 Irish
- W9 Any other White background