



Referral to Money Advice and Community Support (MACS)

For FIF/ BL / BMECA - NOT FOR REFERRALS FROM SOCIAL WORKERS

Date of referral:

Client name:

Address:

Social Landlord? Private Tenant? Home owner ? (delete as applicable)

Name of Landlord

Ethnic Origin

Date of Birth:

Client's telephone number:

do you have client's permission to refer?

Name of Referrer

Referring Organisation

Referrer telephone number:

Is the client a security risk to workers? Y/N

has a tribunal or court date been set for benefits, debts or eviction? Y/N

Is the client at risk of being made homeless? Y/N

Can client attend appointments at MACS office? (if No, explain below) Y/N

Is there a security risk in visiting client alone? Y/N

Has the client been assessed by Social Services? (if yes, detail below) Y/N

first appointment - what is the best way to contact client?

any special communication requirements eg large print, interpreting, etc ?

What are the main concerns regarding the Client's finances? (continue overleaf if needed)

Rent arrears? Possession Order?

Council tax arrears?

if there is a risk assessment relevant to this referral please attach or give details

When the form is complete fax to MACS on 01273 664001 date faxed:

NB: we will call on receipt for more information and to confirm acceptance of referral.