



"Oh no, another form!! We hope it's a quick and fairly pain free one to get through. We just need a few key bits of information and can get more clarity on how to tailor our support with you over a call."

Referral Information	
Name of parent(s), carer (s) to be involved with sessions	
Name of your child or young person (if applicable)	
Your contact details	Address:
Phone number Home: Mobile: Email Address:	
Funding for service has been confirmed?	Purchase Order Number if known:
Y / N	
Self-fund	
Early Help purchase order	
Direct Payment card	
Other	

What would you like to achieve in your BIS-net sessions? (Tick✓ applicable)	
Health and Wellbeing: I would like to seek advice and strategies that help support myself, so I may best support my child, young person.	
Being Safe: I would like to know how to create a safe environment for my child / family and learn how to de-escalate 'meltdowns'.	
Confidence & Self Esteem: I would like to learn how to feel more connected with my child and feel confident in the way I support them.	
Education: I would like to learn more about my child's diagnosis or traits.	
Communication & Interaction: I would like to discover optimal communication supports for my child and learn how to implement these.	

Availability

PLEASE TICK ✓ THE SLOTS THAT YOU WOULD BE ABLE TO MAKE SHOULD THEY BECOME AVAILABLE.

Time	Monday	Tuesday	Wednesday	Thursday	Friday
9 – 10					
10 – 11					
11:30 – 12:30					
1 – 2					
2.30 – 3:30					
4 - 5					

Data Protection

CONSENT TO HOLD AND PROCESS DATA CEDA is required to hold information regarding service users for as long as they attend CEDA plus seven years, or for children until they are 25 years old, and some information may be required to be held indefinitely. All information is held confidentially and will not be shared with third parties, unless you have expressly given permission for us to do so. All data is held in line with the Data Protection Act and the new General Data Protection Regulations, introduced in May 2018.

I, _____ service user/ parent/ guardian/ carer give consent to the data provided being collected and held by CEDA.

I would / would not like to be contacted by CEDA regarding CEDA or other CEDA services.

I would / would not like to be contacted by email

I would / would not like to be contacted by telephone

I would / would not like to be contacted by post.

Signed Date

Thank You for your referral. To help us process it most effectively at this time please return to the following email bisnet@cedaonline.org.uk

Alternately it can be handwritten and posted to the address below.

Kind Regards,

Bis-net



The Clare Milne Centre, Emperor Way, Exeter Business Park, Exeter EX1 3QS
T- 01392 360645 W- www.cedaonline.org.uk E- info@cedaonline.org.uk

PATRON- Roger Jefcoate CBE DL