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Registration Form

Open Arms Personal ID Number

Only to be completed if different to Referral Form

Name _____

Address _____

Postcode _____

Tel No _____ **Mobile** _____

Email _____

How to contact: Phone Can leave message Post email

Languages spoken First _____ Others _____

Do you require language support Yes / No

Courses at Saheliya Hub

Drop In English Computer Sewing
 Fitness Health and Wellbeing Service User Group

Other services Employment Support Saheliya Wellbeing Services
(Counselling or Complementary Services)

Further Information

Do you have a disability that will affect your participation in the Saheliya Hub Yes / No

Details _____

Ethnicity _____ **Religion** _____ **Nationality** _____ **Immigration Status** _____

Medical Information **My GP is** _____ **Medical Centre** _____ **Address** _____

Phone _____ **Medication** _____

Emergency Contact / Next of Kin

Name _____ **Tel no** _____ **Relationship** _____

I have explained to the referred person about the confidentiality and record keeping policies for **Saheliya** and the organisations belonging to the **Open Arms Programme**. This means that information and personal details will be kept safe and confidential. **Staff Member** _____ **Date** _____

I consent to the Open Arms Project holding my personal information on record and understand that I can request to have this information removed from record at any time.

I understand that only Open Arms staff immediately involved in the services I am participating in will be able to access this information.

The service user acknowledges this by signing below *or* staff member initials on her behalf in her presence.

Signed (**Service User**) _____ Date _____

Eligibility Criteria

- 1) My immediate family is in:
 - a. Edinburgh
 - b. Another part of the UK
 - c. Another country

- 2) I have enough people I feel comfortable asking for help:
 - a. Yes
 - b. No

- 3) Available support (choose all that apply):
 - a. Partner
 - b. Friend/s
 - c. Relative/s
 - d. Other _____
 - e. None

- 4) I have been able to make up my own mind about things:
 - a. Yes
 - b. No

- 5) I've been feeling confident:
 - a. Yes
 - b. No

Eligibility Criteria (OFFICIAL USE)

The above named person meets the criteria for the Open Arms Programme.

Staff Member _____ Date _____

SHEC _____