



REFERRAL FOR YORK YOUNG CARER'S CARD



1. DETAILS ABOUT THE YOUNG PERSON

Name	Date of birth
Address and postcode	
Home phone number	Ethnicity
Mobile phone number	
Email address	
School/college	
Head of year	Form group
Name and address of your GP	
Name of person with parental responsibility	
Contact details of person with parental responsibility	

2. WHO DOES THE YOUNG PERSON CARE FOR?

PERSON 1

Name	Date of birth
Relationship to the young carer	
Address and postcode (if different)	
Please tell us about their disability/condition and the help they need.	

PERSON 2

Name	Date of birth
Relationship to the young carer	
Address and postcode (if different)	
Please tell us about their disability/condition and the help they need.	

3. ABOUT THE YOUNG PERSON'S LEVEL OF CARING

Please tell us about the young person's level of caring

4. OTHER FAMILY MEMBERS

Name	Date of birth	Relationship to young person

5. OTHER SERVICES INVOLVED

Is there a safeguarding plan for the young person?	yes / no
Has the young carer had a Young Carers Assessment of Need?	yes / no
Is there a CAF in place for this young person?	yes / no
If there is a CAF who is the lead practitioner?	

Tell us the name, address and contact details of services involved with the young person. Please include social workers, CPNs, Home care, Respite Education, Limetrees, and dates of Young Carers Assessment of need.

Type of service	Name, address and contact details	Date (if relevant)

Is the young carer already part of a young carers' service?	yes / no
If they are not part of a young carers' service, would they like to be?	yes / no

6. SIGN THIS FORM

Has the teacher / tutor discussed this with the parent? (If no, the parent needs to read and sign this form)	yes / no
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Tutor / teacher's signature	Name of tutor / teacher	Date
Young person's signature		Date
Parent's signature	Name of parent	Date

PROCEDURE TO BE FOLLOWED WHEN APPLYING FOR A YOUNG CARER'S CARD



- 1 Card to be advertised to students, either to all students or to those who the school/college believes are eligible—to be decided by school.
- 2 When a young person identifies themselves or is identified as being eligible for card, an appointment with head of year or lead teacher should be made.
- 3 Eligibility criteria to be considered and discussed with young person. If they meet the criteria, procedure to be continued. If they do not meet then other areas of support to be explored. York Carers Centre staff are available to give confidential advice.
- 4 Application form to be filled out with the young person. As much information as possible is needed to get a good understanding of caring role and support required. While filling it in, the purpose of the card should be discussed as well as specific support areas for the young person.
- 5 Application form to be signed by Head of Year / Progress Tutor / Pastoral Support Tutor, young person and to be signed by or discussed with the parent or guardian. The discussion needs to be with the parent or guardian and teacher, this discussion needs to be documented on the form.
- 6 If the young person is already involved a young carers' service then a card can be issued. Please inform the service about this for their records.
- 7 If the young person is not already involved and they would like support from their young carers' service, a referral can be made using the same form already completed for the card.
- 8 Addresses and other contact details for young carers' services are on the following page.

YORK YOUNG CARER'S CARD	
<input type="text"/>	NAME
<input type="text"/>	SCHOOL/COLLEGE
I'm a young carer. I may sometimes need extra consideration.	

SIGNATURE	FROM TIME TO TIME, I MIGHT NEED: your understanding extra time for work time out phone calls
AUTHORISING TEACHER/TUTOR	
Name:	
Signature:	
EMERGENCY DETAILS	
I look after someone who depends on me. In an emergency, please contact:	
Mobile:	
Home:	
York Carers Centre: 01904 715490	

YOUNG CARERS' SERVICES: CONTACT DETAILS

YORK CARERS CENTRE

17 Priory Street • York • YO1 6ET
tel: 01904 715490 fax: 01904 624413
email: enquiries@yorkcarerscentre.co.uk • web: www.yorkcarerscentre.co.uk
Ask for Liz

THE CARERS RESOURCE HARROGATE, RIPON, BRADFORD, CRAVEN AND AIREDALE

11 North Park Road • Harrogate • HG1 5PD
tel: 01423 500 555
web: www.carersresource.org
Ask for Fiona

HAMBLETON AND RICHMONSHIRE CARERS CENTRE

32 High Street • Northallerton • DL7 8EE
tel: 01609 780 872 fax: 01609 788 489
email: penny@hrcarers.f2s.com • web: www.hrcarers.f2s.com
Ask for Graham

SELBY CARERS CENTRE THE WILF WARD TRUST

Unit 18, Ousegate Business Centre • Ousegate • Selby YO8 4NN
tel: 01757 292 532
Ask for Charlotte

ACTION FOR CHILDREN YOUNG CARERS SCARBOROUGH

The Children's Centre • Cherry Tree Avenue • Scarborough • YO12 5HL
tel: 01723 343754
Ask for Pat

BARNARDO'S YOUNG CARERS BRADFORD

Queen's Road • Bradford • BD8 7BS
tel: 01274 481183
Ask for Peter