**Think Family Referral Form**

Please complete this referral form with as much detail as possible, we will then process the referral so our staff can organise a family fire awareness session with the fire setter and family.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Today’s Date:** |  | | | |
| ***FIRESETTER DETAILS*** | | | | |
| **Male** |  | | **Female** |  |
| **First Name:** |  | | **Surname:** |  |
| **Address:** |  | | | |
| **Postcode:** |  | | | |
| **D.O.B:** |  | | | |
| **What school do they attend?** | |  | | |
| **How many siblings do they have?** | |  | | |
| **Age of siblings?** (if applicable) | |  | | |
| **Please give details of any incidents caused by the fire setter, and any other information we need to be made aware of:**  (Please state if the incident occurred inside or outside, and what was involved) | | | | |
|  | | | | |
| ***PARENT / GUARDIAN DETAILS*** | | | | |
| **Parent / Guardian Name:** | |  | | |
| **Contact Number:** | |  | | |
| ***REFERRER DETAILS*** | | | | |
| **Name:** | |  | | |
| **Job Title:** | |  | | |
| **Organisation Name & Address:** | |  | | |
| **Postcode:** | |  | | |
| **Contact Number:** | |  | | |
| **Are any other agencies involved with the fire setter?** | | Yes  No | | |
| **If yes, please give details:** | |  | | |

|  |  |  |
| --- | --- | --- |
| ***ETHNIC ORIGIN OF FIRESETTER:*** | | |
| **White:** | | |
| White British |  | |
| White Irish |  | |
| Any other white background |  | |
| **Mixed or mixed British:** | | |
| White and black Caribbean |  | |
| White and black African |  | |
| White and black Asian |  | |
| Any other mixed background |  | |
| **Asian or Asian British:** | | |
| Indian |  | |
| Pakistani |  | |
| Bangladeshi |  | |
| Any other Asian background |  | |
| **Black or Black British:** | | |
| Caribbean |  | |
| African |  | |
| Any other black background |  | |
| **Other:** | | |
| Chinese |  | |
| Eastern European |  | |
| Migrant family |  | |
| Other (Please state opposite): |  | |
| Prefer not to say |  | |
| Unable to answer |  | |
|  | | |
| Please tick to confirm that the fire setter and/or parent have agreed to have their details passed to South Yorkshire Fire and Rescue, and that we are able to store their data: | |  |