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| **PART 1. ELIGIBILITY CRITERIA** | |
|  | The applicant is a Singaporean citizen or Singapore Permanent Resident |
|  | The applicant is above 16 years old (parental/guardian consent) |
|  | No active substance or alcohol abuser |
|  | Free from serious infection diseases that may be easily transmitted in a communal setting |
|  | Not suffering from serious psychotic disorders and/or serious behavioral problems that require close individual supervisions or nursing care |
|  | Have exhausted all other means of family/informal support |
| \ | Agreeable to work with The Hiding Place ministry on intervention plans |
| **Do provide the rationale to support the referral application if the applicant does not fulfil any of the above criteria.** | |
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| **PART 2. CLIENT’S PERSONAL PARTICULARS** | | | | |
| Name: |  | | NRIC: |  |
| Citizenship: |  | | Date of Birth/Age: |  |
| Residential address (as in NRIC): | |  | | |
| Contact: |  | | Gender: |  |
| Religion: |  | | Marital status: |  |
| Language spoken: |  | | Highest qualification: |  |
| Employment status: |  | | Emergency contact:  \ |  |
| ***GENOGRAM & ECOMAP*** | | | | |

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| **PART 3. PRESENTING ISSUES** | |
| *To include current risks and primary presenting issues in your assessment. Do furnish the social report as it is required for the application.* | |
| Reason for halfway house admission? |  |
| Have you admitted to halfway house before? | Yes / No |
| Do indicate the name of the halfway house(s) if the answer is yes |  |
| Have you been convicted in Singapore or overseas? | Yes / No |
| If yes, do indicate the conviction |  |
| Medical and mental health history |  |
| Housing history |  |

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| **PART 4. REFERRAL’S DETAILS** | | | | | |
| Name of Referral: |  | Occupation: | | |  |
| Organization: |  | Contact: | | |  |
| Email: |  | Relationship with applicant: | | |  |
| Service(s) rendered by referring agency: |  | How long have you been working with applicant? | | |  |
| **Have you notified the applicant of the following?** | | | | **Remarks** | |
| The resident has to undergo one year programme in Hiding Place (Educational programme will be 18 months) | | |  |  | |
| Home leave is only be entitled after nine months of programme (twice per month) | | |  |  | |
| The resident needs to participate all the compulsory activities (Morning devotion, church services, and skills training. etc.) | | |  |  | |
| No phone and electrical gadgets are allowed during the programme | | |  |  | |
| \  Visitation is entitled twice a month starting from the second month of the programme | | |  |  | |
| The social service practitioner or the family member needs to accompany the applicant for intake interview | | |  |  | |
| Did the applicant give consent for the referral to be made to The Hiding Place? | | |  |  | |
| Will you continue to provide casework management to the applicant even after he is admitted into the programme? | | |  |  | |
| Signature of the referral: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |