Registered Address: Creative Optimistic Visions to the address 11 Steeple House, Percy Street, Coventry, CV1 3BY

Confident Me! Referral Form

Creative Optimistic Visions is delighted to announce we have been successful with the ESF Groundwork Community Fund, which has enabled us to deliver two cohorts of Confident Me!

This is a 12-week course, aimed at individuals over the ages of 18years that have been unemployed or socially inactive for 6 months or more. The aim of course is to support individuals with the personal and social barriers to education and or employment.

Learners are invited to join a total of 12 workshops, learning a range of self-development skills, identifying barriers into work and or education, whilst taking a more therapeutic approach as we engage in a range of activities such as arts and crafts, meaningful discussions and the opportunity to have one to one mentoring supporting your individual needs of progression.

Lunch and travel expenses will be provided as well as an additional budget to support any practical barriers such as interview clothing, applying for identification documents etc.

Course programme dates:

Cohort 1 Start date: Tuesday 24th March 2020

10am – 2pm

Location: 213 Walsgrave Road, Coventry, CV2 4HH

Sessions will continue every Tuesday 10am-2pm at the location above until 26th May 2020.

Cohort 2 Start date: Thursday 21st May 2020

10am – 2pm

Location: 213 Walsgrave Road, Coventry, CV2 4HH

Sessions will continue every Thursday 10am-2pm at the location above until 6th August 2020.

Please complete the following information and send to karen@creativeoptimisticvisions.co.uk

If you have any questions please do email the above or call us on 02476 445439

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| --- |
| Referring agency / person |
| Agency |  |
| Address |  |
| Telephone number |  |
| Name of advisor |  |
| Email address |  |

|  |
| --- |
| Learner details |
| Name |  |
| Address |  |
| Post code |  |
| Date of birth |  |
| Telephone number if can be contacted |  |
| Is an interpreter needed? |  |
| Are there any special learning needs? |  |

|  |  |
| --- | --- |
| Reason for the referral |  |
| Any focus areas where support is needed |  |

Any specific dietary requirements?

Learner authorisation for referral

I authorise my case to be referred to Creative Optimistic Visions.

Client signature:……………………………………………………………………………………………. Date:

Advisor signature:……………………………………………………………………………………….. Date:

**Data Protection**

Creative Optimistic Visions regards the lawful and correct treatment of personal information as very important. To this end, Creative Optimistic Visions is committed to adhering to the principles of Data Protection, as detailed in GDPR.

All information provided by the service user during the sessions of Creative Optimistic Visions will remain confidential, however, if we feel that the person is believed to be at risk of harm, or others are at risk of harm, we have a duty to report this concern the relevant person and or organisation.