



LEGAL ADVICE REFERRAL FORM

COMMUNITY WORKER
HOTLINE: (02) 4353 0111

contact@centralcoastclc.org.au

REFERRING ORGANISATION

Organisation Name	<input type="text"/>	Date	<input type="text"/>
Staff Contact Name	<input type="text"/>	Position	<input type="text"/>
Your Phone Number	<input type="text"/>	Email	<input type="text"/>

CLIENT INFORMATION

Family Name	<input type="text"/>	Date of birth	<input type="text"/>
First Name	<input type="text"/>		
Address	<input type="text"/>		
Ph Number	<input type="text"/>	Is it safe to leave a message?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the client Aboriginal or Torres Strait Islander?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

OTHER PEOPLE INVOLVED

Family Name	<input type="text"/>	Family Name	<input type="text"/>
First Name	<input type="text"/>	First Name	<input type="text"/>
Address	<input type="text"/>	Address	<input type="text"/>
Date of birth	<input type="text"/>	Date of birth	<input type="text"/>
Family Name	<input type="text"/>	Family Name	<input type="text"/>
First Name	<input type="text"/>	First Name	<input type="text"/>
Address	<input type="text"/>	Address	<input type="text"/>
Date of birth	<input type="text"/>	Date of birth	<input type="text"/>

CHILDREN'S INFORMATION

1. Name	<input type="text"/>	DOB	<input type="text"/>	3. Name	<input type="text"/>	DOB	<input type="text"/>
2. Name	<input type="text"/>	DOB	<input type="text"/>	4. Name	<input type="text"/>	DOB	<input type="text"/>

LEGAL PROBLEM TYPE

(Please tick any boxes that apply to the person you are referring)

- Financial Hardship** Credit card debts, difficulty paying loans, debt collectors etc.
- Consumer or contract issues** Unfair contracts, insurance, door-to-door sales, scams, funeral policies
- Centrelink** Pensions and payments, debts, fraud prosecutions
- Violence** Domestic violence, physical/sexual assaults, victims of violence, AVOs
- Victims of Crime** Victims support, Victims Services
- Family or Relationship** Contact with children, mediation, parenting agreements, child support, divorce
- Discrimination or harassment** In employment, education, provision of goods and services, housing
- Complaints** Against police, schools, government departments
- Employment** Loss of employment, unfair dismissal, entitlements, bullying/harassment
- Care & Protection** Issues with FaCS/DoCS, early intervention, care plans, kinship care, contact
- Fines** SDRO debts, other fines, Work & Development Orders (WDO)
- Older Persons** Power of attorney, guardianship
- Neighbourhood Disputes** Trees, fences, noise etc.
- Minor criminal offences** Traffic offences,
- Car Accidents** Driving and accidents, property damage

REFERRAL SENT TO CCCLC

Referral sent to CCCLC by	<input type="checkbox"/> Email: contact@centralcoastclc.org.au (please use "LEGAL ADVICE REFFERAL" in subject line)
Date	<input type="text"/> <input type="checkbox"/> Fax: (02) 4353 4680