

INTAKE/REFERRAL FORM FOR PRIVATE AND FAMILY LAW COURT SERVICE REQUESTS

Please complete this form and, if necessary, forward it to the other party/parent through your appropriate communication channel (i.e., via legal representatives or other means) for their agreement and signature.

The parties must complete ALL negotiations, which may involve their legal representation. Family Konnect is unable to mediate between the parties,

Once the parties have reached an agreement, the completed Referral Form, along with a copy of the court order and any other relevant orders, and a copy of the payment receipt for the **\$100 intake fee per parent**, should be forwarded to Family Konnect by one of the parties. Alternatively, each party will complete their intake form and forward it to Family Konnect.

Referral Date:	
Next Court Date:	
Reason for Service Request: (Court ordered supervised contact, introduction to child, history of mental health, substance misuse, family violence and/or child protection concerns).	

INDEPENDENT CHILD/REN'S LAWYER (ICL)		
Solicitor's Name and Firm:		
Solicitor's Contact Details:	Phone:	Email:

FAMILY DETAILS

PARENT 1 (Person with whom child/ren resides)

Name:

Residential Address:

Contact number:

Email Address:

Emergency Contact Name:

Contact Number:

Legal Representative Name and Firm:

Contact number:

Email Address:

Language Spoken at Home:

Interpreter Required?

Y/N

If Yes, what language?

Cultural Identification:

PARENT 2 (Person being supervised)

Name:

Residential Address:

Contact number:

Email Address:

Emergency Contact Name:

Contact Number:

Legal Representative Name and Firm:

Contact number:	Email Address:
Language Spoken at home:	
Interpreter Required?	Y/N If Yes. What language:
Cultural Identification:	

CHILDREN DETAILS

Child/ren Names <i>*Please attach add a row if more than 3 children</i>	Gender M/F	D.O.B	Care needs: Food allergies, medical information, behavioural issues

TYPE OF SERVICE REQUIRED: *(please indicate and outline details of service required)*

- | | |
|---|--|
| <input type="checkbox"/> Supervised Contact | <input type="checkbox"/> Supervised Changeover |
| <input type="checkbox"/> Supervised Transport | <input type="checkbox"/> Child Familiarisation Session |

ORDERS

Please attach a copy of the following:

- ☐ AVO- Apprehended Violence Order
- ☐ Parenting Order
- ☐ Parenting Plan Only

<input type="checkbox"/> Any other relevant Orders	
CONFIDENTIALITY	
Can the adult with whom the child/ren live know or be given contact details relating to the adult requesting contact?	<input type="checkbox"/> No <input type="checkbox"/> Yes <u>Give Details:</u>
Can the adult requesting contact know or be given contact details relating to the adult whom the child/ren live?	<input type="checkbox"/> No <input type="checkbox"/> Yes <u>Give Details:</u>
SUPERVISED TRANSPORT	
Will the child/ren require transport by Family Konnect to and from the venue?	<input type="checkbox"/> Yes (if yes, please ensure you have provided the pick-up and return location address , this information will remain confidential). <input type="checkbox"/> No
Car seating requirements for your child/ren? If your child/ren require transport to and from the venue please specify the type of car seats required.	<input type="checkbox"/> Baby reversible <input type="checkbox"/> Booster 1-4 years <input type="checkbox"/> Booster 4-7 years
CHANGEOVERS	

Will both parents be present at handover of the child/ren prior to the service start time?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If parents do not wish to come into contact, please specify a meeting point where the child/ren will be delivered to the supervisor, and a meeting point where the supervisor will meet the parent to be supervised.	Carer Parent meeting point: Supervised Parent meeting point:
ADDITIONAL INFORMATION	
Please include the child/ren hobbies and activities, likes and dislikes, any other relevant information regarding to your child/ren's needs or any information regarding to this request that you did not include in the above questions.	

FAMILY VISIT/CHANGE OVER – PROPOSED SCHEDULE If unsure about completing this schedule, Family Kconnect will assist you during the intake assessment interview. Pickup/handover – time the child/ren are collected from the carer parent. Visit supervised time – time child/ren are face to face with supervised parent. Return/handover time – time the child/ren are due to be returned to the carer. Venue name & address – provide as much detail as possible about the visit venue location/meeting point.				
Visit/Change over Date	Pickup / change over time	Visit - supervised times	Return/ changeover time	Visit venue name /Meeting Point/address

Intake Assessment and Its Purpose:

Before any service is accessed, *both adults* must have completed an intake assessment.

The purpose of the Intake Assessment is:

- To identify the child/ren's needs and how we can best support them.
- To consider the nature and extent of any risk.
- To appraise whether the service has the capacity and resources to provide the required supervision.
- To have a full and frank exchange of information between each party and this agency so that each can make an informed decision. The information exchange will include details of the service's purpose, duration, limitations, and costs of the service.
- Data collection and limits to confidentiality will be discussed.
- Assess whether the proposed arrangements serve the interests of the child.

Any changes/ additional dates must be approved by both parties and sent in writing to Family Konnect.

I agree that the information provided in this form is correct. Any changes/ additional dates must be approved by both parties and sent in writing to Family Konnect.

Please send the intake fee of \$100 per parent to the following bank account:

Family Konnect Pty Ltd

BSB: 067 873

Acc#: 12848854

Signed by:

Parent 2/ Person being supervised:

Print Name:	
Signature:	
Date:	

Parent 1/ Person with whom child/ren resides:

Print Name:	
Signature:	
Date:	

THIS FORM IS NOT VALID UNLESS THERE ARE 2 SIGNATURES AND BOTH PARTIES AGREE TO THE SCHEDULED ARRANGEMENTS.