**Refugees into Jobs**

Employment Information, Advice and Guidance Service

## **Client Referral Form**

**Eligibility criteria:**

* Refugee Status/LLR/DLR /HP as the result of asylum and Refugee Family Reunion
* English Entry Level 3
* Commitment to progress into employment and engage with project activities

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| --- | --- | --- | --- |
| **Date of Referral** | |  | |
| **Client Information** | | | | | | |
| **Title** |  | | **First Name(s)** | | |  |
| **DOB** |  | | **Last Name** | | |  |
| **Address** |  | | | | | |
| **Telephone** |  | | **Email** | |  | |

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| **Immigration Status** | |
| Refugee Status LLR// DLR/ HP as a result of asylum claim | **Yes / No** |
| Does client have status documents | **Yes / No** |

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| --- | --- | --- | --- |
| Type of Advice Required | | | |
| **Training** | | **Education** | **Employment** |
| **Comment** Please briefly provide some background information on client and what they are looking for. |  | | |

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| **Referral Information** | |
| Referred by |  |
| Contact details |  |

**Please email completed referral form to:** [**RIJ@refugeecouncil.org.uk**](mailto:RIJ@refugeecouncil.org.uk)