



**Office Use Only**

**Client Reference  
No:**

### Self-Referral Form

Which MOVE Group are you referring yourself to \_\_\_\_\_

#### 1. CLIENT DETAILS

<b>Name</b>	
<b>Date of Birth</b>	
<b>Address</b>	
<b>Telephone Numbers</b>	
<b>Email Address</b>	
<b>Ethnicity</b>	

#### 2. Do you have any of the following needs/issues?

<i>Please Indicate which of the following apply</i>	<b>Please Tick</b>
<b>Dyslexia/ Literacy Difficulties</b>	
<b>Mental Health Difficulties</b>	
<b>Drug/Alcohol Issues</b>	
<b>If any of the above needs/issues are identified, please provide additional details.</b>	

**STATUS OF PARTNER RELATIONSHIP:** *Please tick the status of the current partner/ex-partner relationship.*

**MARRIED.....COHABITING..... DIVORCED.....SEPARATED.....OTHER....**



## 5. Reasons for referral

a) <b>Why are you referring yourself to MOVE?</b> <i>i.e. History of domestic abuse, Causes of concern</i>
b) <b>Description of abuse to partner</b> <i>i.e. Type, level and frequency of domestic abuse</i>
c) <b>To what extent do you acknowledge this use of abuse in your relationship?</b>
d) <b>What do you hope to achieve by attending the MOVE programme?</b>

I confirm the information above and agree that it can be conveyed to MOVE.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_ (Prospective group participant)

Completed referral should be posted or emailed to:

<p><b>MOVE Dublin Swords, Dublin City and Tallaght, MOVE Meath</b></p> <p>Dublin Coordinator MOVE Ireland Carmichael House, Brunswick Street, Dublin 7 Email: <a href="mailto:lisa@moveireland.ie">lisa@moveireland.ie</a></p> <p>Ph No: 0864149591</p>	<p><b>MOVE Cork</b></p> <p>John Russell Cork Coordinator MOVE Ireland C/O Probation Service St Nicholas Church Cove Street, Cork Email: <a href="mailto:johnrussell@moveireland.ie">johnrussell@moveireland.ie</a></p> <p>Ph No:0656044047</p>
<p><b>MOVE Sligo, Midlands, Galway</b></p> <p>Mid-West Coordinator MOVE Ireland Unit 2 First Floor, Clare Business Centre, Clare Rd Ennis Co. Clare Email: <a href="mailto:marie.mclaughlin@moveireland.ie">marie.mclaughlin@moveireland.ie</a></p> <p>Ph No. 0858748108</p>	<p><b>MOVE Limerick/ Clare, North Tipperary and Kerry</b></p> <p>South-West Coordinator MOVE Ireland, Unit 2 First Floor, Clare Business Centre, Clare Rd Ennis Co. Clare Email: <a href="mailto:maura@moveireland.ie">maura@moveireland.ie</a></p> <p>Ph No:0864149613</p>