





Referral Form

Resilient Kids is a mental health support program for children and young people in the Northern Rivers who have been affected by the 2022 flood disaster. This program also supports the parents, families, and carers of flood affected children and young people. Resilient Kids is a free program.

Referring Organisation Details					
Organisation:		Contact Person:			
Date:		Phone:			
Eligibility Criteria					
Does the participant meet all the following:					
Is aged 8 to 18 years old:		☐Yes	□No		
Is a resident of the Northern Rivers region:		☐Yes	□No		
They or their family were impacted by the 2022 floods:		☐Yes	□No		
Participant Details					
First Name:	Last Name:	Preferred Name:			
Date of Birth:	Phone:	Email:			
Address:					
Preferred Method of Contact:		Pronouns:			
☐ Phone	□Text	□ Email	☐ Mail		
All further questions are optional, your responses won't impact on the participant's access to the program.					
Gender:	☐ Female	☐ Male	☐ Non-Binary		
	☐ Gender Fluid	☐ Different Identity (please	e specify)		
Do they identify as LGBTIQSB+?		□Yes	□No		
Indigenous Status:	☐ Aboriginal	☐ Torres Strait Islander	☐ Neither		
Country of Birth:	☐ Australia	☐ Other (please specify)			
Main Language Spoken:	☐ English	☐ Other (please specify)			
Do they identify as Culturally and Linguistically Diverse?		□Yes	□No		
Do they identify as a person with a disability?		☐Yes	□No		
If yes, please specify:	☐ Autism	☐ Cognitive	☐ Hearing		
☐ Intellectual / Learning	☐ Mental Illness	☐ Physical	☐ Speech		
□ Vision	☐ Other (please specify)				





Parent, Carer, or Guardian Details					
First Name:	Last Name:		Preferred Name:		
Date of Birth:	Phone:		Email:		
Address:					
Preferred Method of Contac	ct:	Pronouns:			
□Phone	□Text	☐ Email	☐ Mail		
Gender:	☐ Female	☐ Male	☐ Non-Binary		
	☐ Gender Fluid	☐ Different Identit	y (please specify)		
What are the primary reasons for referring the participant to Resilient Kids?					
Is there anything else we should know?					
Has the participant given verbal consent that they would like to engage with Social Futures, are willing to have their details stored in our system, and are willing to be contacted?		Yes	□No		
		Date Consented:			
Has the participant's parent, carer, or guardian given verbal consent that they would like to engage with Social Futures, are willing to have their details stored in our system, and are willing to be contacted?		☐Yes	□No		
		Date Consented:			
Once you have completed as much of this form as you are able, please return to:					
resilientkids@socialfutures.org.au					

1800 957 077

socialfutures.org.au/resilient-kids