



LOAVES AND FISHES

Application form (and assessment by the social worker)

PERSONAL DETAILS

Date:

Name and Surname:

.....

Date of Birth: Age:

Do you have an ID document: (provide us with a copy?)

Identity number:

Contact Details:

Gender (tick one): Male / Female

Marital Status (tick one): Never married / married / divorced / widowed

Languages understood: Afrikaans/ English/ Xhosa/ Zulu/ French

Current accommodation:

Referral Source:

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Have you stayed at Loaves and Fishes before? (Tick one) Yes / No

If yes, when was it?

.....

NEXT OF KIN/FAMILY:

Name: Relationship:

Address:

.....

..... Tel. number:.....

No application can be process without references.

REFERENCES:

<i>Name</i>	<i>Relationship</i>	<i>Tel. number</i>
1.....	
2	
3	

EDUCATION

School attended:

Highest level passed at school:

Tertiary education;

Any other education / training / skills:

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EMPLOYMENT

Current employment:

.....

Financial declaration:

Current Income: Casual worker @p day, Permanent worker @p week/month

Unemployed with no income (skarrel) yes/no

Do you receive a SASSA grant/pension? (Tick one) Yes / No

If you receive a disability grant, why and for how long?

Any other income (private pension/trust fund UIF, interest on savings/investment)

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Previous employment:

1.....

2.....

3.....

BACKGROUND INFORMATION

What significant events led to you current situation?

FAMILY BACKGROUND

What is your relationship with your family?

Parents/Siblings: Good/ complicated/no contact at all.

Wife or ex-wife / husband or x-husband: Good/ complicated/no contact at all.

Children: Good/ complicated/no contact at all.

Why can you not stay with family?

.SOCIAL WELFARE:

Have you ever stayed in any other shelter before? Name of shelter? How long

Have you ever had any contact with social workers/counsellors or psychologists?

CRIMINAL RECORD

Have you ever been arrested for anything? (Tick one) Yes / No

If yes, what was the offence?

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What was the outcome of the case: Dismissed / Awaiting trial / sentenced/ paid fine

Do you have any pending criminal cases against you? Yes/no

When is the trial date?

Are you on parole? Yes/No

RELIGION

To which church do you belong? How often do you attend church?

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HEALTH

Do you suffer from any illnesses?

Are you taking any medication? Specify:

.....

.....

.....

Which clinic / hospital do you attend, if you need medical attention?

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Hospital Folder number:

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When was your last clinic / hospital appointment?

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When is your next appointment?

.....

SUBSTANCE ABUSE (Please be honest!!)

Do you drink alcohol? Yes/No,

How often and how much?

When did you last have a drink?

Have you ever taken drugs? Yes/No

If yes, which drugs do you take, and how often?

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When was the last time you took drugs?

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Have you ever been to a treatment or rehabilitation centre? If yes where, when, and for how long?

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PERSONAL GOALS

Why do you think you would be able to benefit from the Loaves and Fishes programme?

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LONG TERM GOALS

What would you like to achieve in 5 years' time?

EXIT PLAN

If you leave Loaves and Fishes, where would you like to stay?

.....

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How long would you want to stay at Loaves and Fishes? 3 months; 6 months

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I hereby declare that to the best of my knowledge all the information on this application form is true.

I give the social worker permission that relevant information may be disclosed to management team of Loaves and Fishes, in order to support my renewal program.

Applicant's Signature: Date:

Staff signature.....