

Hannah's Fund
www.hannahsfund.co.uk
info@hannahsfund.co.uk
Charity number 1175857

Psychology Associates
www.psychologyassociates.org.uk
enquiry@psychologyassociates.org.uk
0300 303 5233



Please note that the information you provide is kept confidential between members of the committee of Hannah's Fund and appropriate members of staff at Psychology Associates. If you would like to talk to someone for more information, please contact either Hannah's Fund or Psychology Associates on the above contact details.

Referral Form

Name of person being referred to Psychology Associates:

Name of Referrer:

Contact Number of Referrer:

Contact Email of Referrer:

Address/Location of individual being referred:

What is your relationship to the person you are referring? (If you are self-referring, please note this below):

If you are referring someone else, have you gained consent from this individual to contact Hannah's Fund?

Date of Birth of individual being referred:

Reason for referral: (E.g. Any diagnoses including physical or mental health illnesses?)

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Is the individual/are you able to travel to therapy? If so, please note maximum length of travel: (E.g. 30 minutes away from home address)

Would you/would the individual prefer to engage in therapy sessions virtually? (E.g. Phone or video conference such as Teams)

Any further information that you think will help us place you/ the individual you are referring, with the best Therapist/Psychologist? (E.g. Does the person/do you have a hearing and/or sight impairment? Are there any medical reports that would be beneficial for the Psychologist or therapist to review before meeting with the individual?)

Please tell us how you heard about the Hannah's Fund referral pathway:

When completed, please email this referral form to
enquiry@psychologyassociates.org.uk