

CABL Intake and Assessment

Consent obtained for CABL to keep personal information:	YES/NO
Consent obtained for CABL to keep information but de-identified:	YES/NO
Name:	
Contact details:	Phone Number: Email Address:
Residential address: If you do not want to disclose your address, please provide just the suburb, state and postcode.	
Date of Birth:	
Gender:	
Country of Birth:	
Do you Identify as Aboriginal and/or Torres Strait Islander? (Please tick)	<input type="radio"/> No <input type="radio"/> Aboriginal <input type="radio"/> Torres Strait Islander <input type="radio"/> Aboriginal and Torres Strait Islander
Main language spoken at home:	

Where you referred to CABL by another organisation, service or program? If yes, please provide details.	
--	--

From the list below, please choose the reason/s you are seeking help:

- Physical health
- Mental health, wellbeing and self-care
- Personal and family safety
- Age-appropriate development (e.g., need support with child’s development)
- Community participation and networks (e.g., feeling socially isolated, need community/family support, want to engage with the community more).
- Family functioning (e.g., family conflict, lack of support, support with establishing positive family relationships, support with increasing parenting capacity)
- Financial resilience (e.g., difficulty finding money for emergencies, struggling with costs of living).
- Employment
- Education and skills training
- Material wellbeing and basic necessities (e.g., limited access to basic material resources like food, clothes, transport)
- Housing
- Support to caring role

Main reason:

<p>Do you have any medical/ additional care needs:</p>	<p>YES/NO If yes, please tick</p> <ul style="list-style-type: none"> <input type="radio"/> Intellectual learning <input type="radio"/> Psychiatric <input type="radio"/> Sensory/speech <input type="radio"/> Physical/diverse <input type="radio"/> Other:
<p>Are you homeless or at risk of homelessness:</p>	<p>YES/NO</p>
<p>How would you describe the makeup of your household:</p>	<ul style="list-style-type: none"> <input type="radio"/> Single (person living alone) <input type="radio"/> Sole parent with children in your care <input type="radio"/> Couple <input type="radio"/> Couple with children in your care <input type="radio"/> Group of related adults <input type="radio"/> Groups of unrelated adults
<p>Details of child/ren:</p>	<p>Names and ages, and level of contact if not in the care of person completing form:</p>

DSS Standard Notification on Privacy

The information you provide on this form includes your personal information. Your personal information is protected by law, including by the Commonwealth Privacy Act.

We are using an IT system called the 'Data Exchange' to store your information. This system is hosted by the Australian Government Department of Social Services (DSS). The personal information that is stored on the Data Exchange is only disclosed to us for the purpose of managing your case.

You do not have to consent to sharing your personal information with DSS. If you do not consent to us sharing your personal information, it will not affect the services you receive. If you do consent to sharing your personal information with DSS, you can ask for this information to be removed at any time.

DSS de-identifies your data. This means they remove information that identifies you or that could be used to re-identify you (e.g., your name).

DSS combine your data with other clients' data in the Data Exchange to identify trends at the program level. This information is used to develop policy, administer grants programs, and conduct research and evaluations. DSS may use this data to produce reports. These reports may be shared with other organisations. The data in these reports is de-identified.

You can find more information about how DSS will manage your personal information in the DSS privacy policy on their website: <https://www.dss.gov.au/privacy-policy>.

This policy explains:

- how to access the personal information that is stored about you on the Data Exchange
- how you can ask for this information to be changed or removed.
- the circumstances in which DSS may disclose personal information to overseas recipients
- how to complain about a breach of the Australian Privacy Principles by DSS, and how DSS will deal with your complaint.

For more information about the Data Exchange, please speak to your practitioner or service provider.

I consent to my personal information to be stored in the Data Exchange	<input type="radio"/> Yes <input type="radio"/> No
I consent to participate in follow up research, surveys or evaluation	<input type="radio"/> Yes <input type="radio"/> No
I have sighted and signed CABL's consent request form	<input type="radio"/> Yes <input type="radio"/> No

Name:	Date:
Signature:	