Reg. No _____

INTAKE FORM FOR NEW CLIENTS

Referred by _____ **Date** _____

Family Name _____ **Given Name/s** _____

Date of Birth:_____ **Male** ☐ **Female** ☐

Address_____**Post Code**_____

Telephone Home_____ **Mobile**_____

Email_____

Level of English Proficiency: **Beginner** ☐ **Intermediate** ☐ **Advanced** ☐

Will you understand a phone conversation in English? **Yes** ☐ **No** ☐

Do you have other family members registered for classes at Brand New Day? If so, please give details:

Name: _____ **Husband** ☐ **Wife** ☐ **Other** _____

Residency Status: Australian Citizen ☐ **Bridging Visa** ☐ **Community Detention** ☐ **Other**_____

Country of Origin_____ **Date of Arrival in Australia** _____

Usual Language Spoken at Home _____ **Do you have Work Rights in Aust? Yes** ☐ No ☐

Aboriginal or Torres Strait Islander? Yes ☐ **No** ☐

Dependent Children **Yes** ☐ **No** ☐

Will you require child minding in order to attend classes? If Yes, list Children's Name/s, Gender and Age/s

Name	✓ Male	✓ Female	Age

****

Centrelink Reference Number _____ **Waiting for Centrelink Card** ☐

Type of Benefit _____ **Not eligible for Centrelink Card** ☐

Income $_____ **Per fortnight** **If NO Centrelink, state source of income**_____

Own Home ☐

Rent - Private ☐ **Public** ☐ **Amount paid $**_____ **weekly / fortnightly / monthly**

Rooming House ☐ **Homeless** ☐

Workshop Interests: *Identify in order your* **preferences** *e.g. 1 2 …….*

	Conversational English **Basic ☐ Intermediate ☐ Advanced ☐**		***Cooking & Baking***		***First Aid + CPR***		***Barista Coffee Course***
	Sewing **Basic ☐ Advanced ☐**		***Carpentry***		***Cake Decorating***		***Food Handling***
	Computers **Basic ☐ Intermediate ☐**		***Budgeting***		***Gluten Free Cooking***		***Art***
	Floral Art						

Other Services: Help to prepare a Resume (by appointment)❑

DECLARATION:
When offered a place in a workshop, I will commit to attending classes regularly

Signature: ……

For Office Use Only

INTERVIEW SUMMARY

Primary reason for visit: _____

Interview Notes:

_____

_____

Follow –up:
Follow up interview booked on: *(Date)* _____
Other: *(Give details)* _____

Registered for workshops as follows:

Workshop	Date	Time