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Slough Borough Council

Taking pride in our communities and town

Thursday, 23 June 2011

Dear ……(*Parent/Carer/Young Person*)

When a child or young person needs access to additional or specialist services, we are now using the Common Assessment Framework (CAF). This will help to reduce the number of forms you need to fill in by making information available electronically to those who need to see it. The form will be discussed with you, and you will get a copy for yourself.

The information will only be shared with the following service(s)/individuals, and if other people need to be involved later, the changes will be discussed with you first.

Service	*Name*
……	……
……	……
……	……
……	……

I[1] consent for the CAF to be started and for information to be stored and shared electronically[2] with the above services. I give consent for the above services to work with me/my child.

Signature …… Date ……..

Child/Young Person's name	DoB
Address:	Tel (if applicable)
Parent's/Carer's name(s)	
Address	Tel
	Tel
Current School (or professional's name, role and contact details)	Tel
	Tel

Please ask if you have any further questions,

Yours,

[1] Parents should sign this form unless the child is considered to be of an age and understanding to give consent
[2] Information is held on a secure network and cannot be transferred to portable devices.