Self-Referral Form

**Please return completed form to email:** **shine@sjmt.org.uk** **or send a clear photograph via WhatsApp to 07442 372 033**

This information will remain confidential.

Shine is a service for young people. If you're care experienced, a care leaver or interested in education, employment and training opportunities then Shine maybe able to help. Let us know if you need a hand filling in the form. You can contact us on 07442 372 033 or at shine@sjmt.org.uk

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| **Young Persons Details**  |
| **Your preferred pronouns:** |  |
| **Your full name** |  |
| **Date of Birth:** |  |
| **Address where you are currently staying (including postcode)** |  |
| **How would you like us to get in touch with you?** | **Mobile** |  |
| **Email address** |  |
| **Other** |  |
| **What sort of help are you looking for?** |
|  |
| **Is there anything else you feel ready to share with us now?** |
|  |

**Someone from Shine will be in touch with you soon.**