**Creative Life Story Work**

**All About Me Information Form**

This form should be completed by the child or young person’s social worker. This information is to support the Artist and Pastoral Support Worker / dedicated Therapeutic Social Worker to facilitate the sessions – please do not provide significant detail, simply main, pertinent headlines.

**About your child / young person**

|  |  |
| --- | --- |
| **What is their name?** |  |
| **How do they like to be addressed?**(If different from above) |  |
| **How old are they?**  |  |
| **Does the child or young person have any additional needs?**  |  |
| **Does the child have access to a laptop, tablet or computer?** | Y / N |
| **Does their home have Wifi?** | Y / N |

**About the person attending sessions with child / young person**

|  |  |
| --- | --- |
| **Name** |  |
| **Telephone number** |  |
| **Email address** |  |
| **Street address** |  |
| **What is the nature of their relationship to the child or young person?** (Please also provide their job title) |  |

**About their background**

|  |  |
| --- | --- |
| **Is there any significant information that the artists need to take account of? Please provide as much information as possible.**(e.g. Anything child or young person DOES NOT like, things they DO like) |  |
| **Are there any significant historical issues that the artists need to know about? Please provide as much information as possible.**(e.g. Their journey into care) |  |
| **Are there any significant current issues that the artists need to know about? Please provide as much information as possible.**(e.g. Big falling out with best friend) |  |

**Completing and returning the form**

Please forward the completed form to your Team Manager. The Team Manager should then send to the Pastoral Support Worker facilitating the Artist/session.