

Consumer information

Purpose: to collect common demographic and other essential consumer information that can be shared with another agency.

Consumer details

Family name: _____

Given names: _____

Preferred name/s: _____

Date of birth: dd/mm/yyyy _____ / _____ / _____

Is the date of birth estimated? Yes No

Gender: _____ Title: _____

Home address _____

_____ Post code: _____

Postal address (if different from above): _____

_____ Post code: _____

Contact phone numbers

Can leave message? Yes No

Home number: _____

Mobile Number: _____

(tick preferred number)

Home: Yes No Work: Yes No

Mobile: Yes No Email: Yes No

Are you a carer or care recipient? Yes No

Employment/student status Code:

Comments: _____

Country of birth: _____

Indigenous status: _____

Are you of Aboriginal and/or a Torres Strait Islander origin?

Yes No Not stated/unknown

Refugee status: Yes No Not stated/unknown

If yes, year of arrival: _____

Need for interpreter services: Yes No

Preferred language: _____

Communication method: _____

General Practitioner (GP)

GP name: _____

Practice name: _____

Address: _____

Phone: _____

email: _____

Who the agency can contact if necessary

(for example. carer, parent, next of kin, guardian, friend, emergency contact, case manager, support worker)

Contact 1 Name:

Home address _____

_____ Post code: _____

Phone numbers

Home: _____

Work: _____

Mobile: _____

Relationship to consumer: _____

Contact 2 Name:

Home address _____

_____ Post code: _____

Phone numbers

Home: _____

Work: _____

Mobile: _____

Relationship to Consumer: _____

Government pension/benefit status:

If on a disability support pension nature of disability: _____

Health care card holder status:

Card number: _____ Expiry: _____

Medicare card & status:

Card number: _____ Expiry: _____

Health insurance status:

Insurer name: _____

IRN number: _____

Card number: _____ Expiry: _____

DVA card entitlement:

DVA card type: _____

DVA card number: _____ Expiry: _____

Compensable funding source:

Comments