

# Offploy Probation Referral Form - V8 270122

Referral Date

The candidate must attend one of the following DWP offices, please choose one:

Is the candidate receiving support for significant mental health challenges?

Does the candidate have any outstanding charges or arrests?

Is the candidate currently abusing substances?

Does the candidate currently have stable / suitable accommodation?

Is the candidate willing to disclose their conviction to Offploy?

Is the candidate willing to accept an offer of employment within three months?

Does the candidate consent to this referral and Offploy processing their data in line with GDPR?\*

Should you have any questions on the criteria, please email [referrals@offploy.org.cjsm.net](mailto:referrals@offploy.org.cjsm.net)

## Referrer's Details

Your Email Address

If this is the first time you're completing an Offploy referral form, please complete the details below.

Salutation                      Your First Name                      Your Last Name

Your Job Role                      Your Mobile Number

## Probation Officer's Details

Salutation                      Probation Officer's First Name                      Probation Officer's Last Name

Probation Officer's Email Address                      Probation Officer's Contact Number

Probation Officer's Office

\*Signed consent will be sought from the candidate once we receive the referral form.

## Candidate's Details

Salutation                      First Name    Last Name

National Insurance Number    Candidate Date of Birth

Contact Number    Email Address

Address Line 1    Address Line 2

Town / City    County    Post Code

## Conviction & Risk Information

Supervision end date    Community Payback

Risk of harm to self    Community Payback Hours  
*this is 30% of total hours of requirement*

Risk of harm to public

Please provide any employment-specific restrictions this candidate must comply with

Please provide advice to Offploy colleagues and businesses on any extra risk precautions that should be considered

\*Signed consent will be sought from the candidate once we receive the referral form.

## Approval and Disclosure

Offploy requests that these boxes are only ticked where necessary in the interest of risk management as over disclosure or unnecessary employer interactions can have adverse effects on securing sustainable employment opportunities. Please make your candidate aware of these approvals before completion as they will need to be openly discussed.

**Is it necessary for:**

1. **You** to approve an interview opportunity before a candidate attends?
2. **You** to approve an employment opportunity before the candidate attends their first day of work?
3. **You** to speak with an employer before the candidate begins employment?
4. The candidate to disclose their conviction if they have not been asked by the employer?

By submitting this form, I understand that Offploy keeps data on me and my candidate such as contact details, interactions, quantity of referrals and the eligibility of candidates referred. This data is stored to help improve our service and may result in Offploy contacting you to help improve our service.

**Please email your referral form to [referrals@offploy.org.cjsm.net](mailto:referrals@offploy.org.cjsm.net)**