

6 Is there any other information which you think might be helpful?

Signed (Birth Relative)

Signed (Social Worker)

Name of SW (please print)

Address of SW

Contact Tel No

Please return to: Adoption Matters Northwest
14 Liverpool Road
Chester
Cheshire
CH2 1AE

This Service is funded by Cheshire West & Chester Council

Adoption Matters Northwest

14 Liverpool Road, Chester, CH2 1AE

Tel: 01244 390938 Fax: 01244 390067 E-mail: info@adoptionmattersnw.org

Website: www.adoptionmattersnw.org

Adoption Matters Northwest, a company limited by guarantee incorporating Blackburn Diocesan Adoption Agency and Chester Diocesan Adoption Services • Registered in England (No 1617324) • Registered Charity No 512892
Approved as an Adoption Society by Ofsted



CONFIDENTIAL

REQUEST FOR SERVICE

(To be completed jointly by social worker and birth relative)

1 Name of Birth Relative wishing to use the service:

Address:

Telephone Number:

E-mail address:

Name of child/ren concerned:

Relationship to child/ren concerned:

2 How may appointments be arranged? *(please tick)*

- Letter
- Phone
- Other *(Please specify)*

3 What is the suggested meeting place? *(please tick)*

- service user's own home
- social services meeting room
- family centre
- other *(please specify)*

Are there any times which would be particularly difficult or inconvenient?

4 What are the main reasons for requesting the service?
What does the service user hope to gain from this?

5 What is the current position with regard to care or adoption proceedings?
(eg have court/review dates been set? Are proceedings contested? Has the child been placed? What are the current contact arrangements?)