



For Lichfield, Burton, Tamworth and surrounding areas, please post to:

Midlands Psychology CIC  
The Hayes  
19 Newport Road  
STAFFORD  
ST16 1BA

Tel: 01785 748447

For Stafford, Rugeley, Cannock Wombourne and surrounding areas, please post to:

Midlands Psychology CIC  
The Hayes  
19 Newport Road  
STAFFORD  
ST16 1BA

Tel: 01785 748447

**MIDLANDS PSYCHOLOGY**

**AUTISM SERVICE REFERRAL FORM**

**Referrer Details**

Name: ..... Job Title: .....

Contact No: ..... Email: .....

Address:.....

.....

If the child is under 16, have the child's parents consented to the referral? Yes  No

**Child Details**

Name: .....  Male  Female DoB: ...../...../.....

NHS Number: ..... G.P. & Address: .....

Child's Address: .....

.....

Parent/Carer's Name: ..... Contact No: .....

Child's School & Address: .....

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**Referral Details**

Tick all that apply:  First referral  Re-referral  Assessment  Intervention

Concerns identified in 3 areas (social, communication, flexibility of thought)\*? Yes  No

Main Concerns: .....

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\*Please attach copies of all existing reports including the Paediatric Assessment