

# DRIVING INTAKE AND ASSESSMENT FORM



OASIS YOUTH SERVICES

## CLIENT DETAILS:

Full Name:	Date of Birth:	Gender Identity
Address:		
Suburb:	State:	Postcode:
Email:	Mobile:	
Country of Birth:	Home:	
Cultural Background:	Indigenous Australian: <input type="checkbox"/> Yes <input type="checkbox"/> No	Language other than English:

## CASE OVERVIEW

Referring Agency/ Job Service Provider:	Next of Kin Name: Mobile:		
Contact Person	Phone:	Address:	Relationship:

## CAPACITY ASSESSMENT

Finance & Employment / ID	Accommodation / Education / Health
Centrelink Customer: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Youth Allowance <input type="checkbox"/> New Start <input type="checkbox"/> Pension <input type="checkbox"/> DSP <input type="checkbox"/> NDIS <input type="checkbox"/> Other: Under parents Payment -	Type of Accommodation: <input type="checkbox"/> Family home <input type="checkbox"/> Housing NSW <input type="checkbox"/> Boarding house <input type="checkbox"/> Transitional <input type="checkbox"/> Crisis Refuge <input type="checkbox"/> Other:
Are you currently working? <input type="checkbox"/> Yes <input type="checkbox"/> No Hours per week:	Do you have family support at home? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any unpaid debt or fines? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, approximately how much? _____	Is there a licensed driver in your home? <input type="checkbox"/> Yes <input type="checkbox"/> No
Institution/s money owed to: _____	Would you like support to accumulate your log hours outside of driving lessons? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you had to borrow money from Family, friends or lenders to get by? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you currently studying? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do your finances cause you to Stress or worry? <input type="checkbox"/> Yes <input type="checkbox"/> No	Educational Institution:
Would you like to improve your financial situation? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you able to read English without assistance? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever had your license suspended due to fines or other offences? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have any physical health issues? <input type="checkbox"/> Yes <input type="checkbox"/> No Please List:
Are you engaged in other Salvation Army programs? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have any mental health issues? <input type="checkbox"/> Yes <input type="checkbox"/> No Please List:
TSA Program:	Are you taking any drugs or medications? <input type="checkbox"/> Yes <input type="checkbox"/> No Please List:

Which of the following Identification documents do you have?

Birth Certificate/Card  Passport  Citizenship Certificate RMS Photo Card  TAFE / UNI Student card  Bank Card  
Medicare Card  Foreign Driver's License  Bill / Bank statement Other: \_\_\_\_\_



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DRIVER INFORMATION	
Learners Permit No:	Hours written in your log book:
Lesson Type: <input type="checkbox"/> Intro    1 hour <input type="checkbox"/> 1.5 hour <input type="checkbox"/> 2 hour <input type="checkbox"/> License & test	
Lesson Packs: <input type="checkbox"/> 3 Pack    5 Pack <input type="checkbox"/> 10 Pack	
Funded by: <input type="checkbox"/> RMS <input type="checkbox"/> Agency    Client	Payment Type:    Cash/Card <input type="checkbox"/> Invoice <input type="checkbox"/> Cheque
<b>STUDENT SIGNATURE:</b>	<b>DATE:</b>
SURVEY	
The Salvation Army requests as part of the program, you complete a survey before/when you start and once your driving lessons are completed.	
Do you give permission for this? <b>YES / NO</b>	
If <b>YES</b> , how would you prefer the delivery of this (please circle)?	
In person / Via Phone / Email -	
OFFICE USE ONLY	
<b>ENTRY SURVEY:</b> <a href="https://www.surveymonkey.com/r/BASELINELEARNER">https://www.surveymonkey.com/r/BASELINELEARNER</a>	<b>EXIT SURVEY:</b> <a href="https://www.surveymonkey.com/r/EXITLEARNER">https://www.surveymonkey.com/r/EXITLEARNER</a>
<b>DATE:</b>	<b>DATE:</b>
<b>COMPLETED BY:</b>	<b>COMPLETED BY:</b>