

BOUNCE BACK SELF REFERRAL FORM

NAME.....

ADDRESS.....

PRISON AND DATE OF RELEASE (WHERE RELEVANT).....

OFFENDER MANAGER and OFFICE.....

No.	Criteria	Please ✓ if yes
1.	<i>Are you either an offender subject to statutory supervision or who has been released from prison in the last 3 months?</i>	
2.	<i>Do you wish to train and work as a painter and decorator?</i>	
3.	<i>Are you free from any alcohol or drug reduction programme or medication?</i>	
4.	<i>Are you free to work in the UK with a National Insurance number?</i>	
5.	<i>Do you have or intend to have a home address in Greater London?</i>	
6.	<i>Do you believe you could work as a good team member, behaving with courtesy to others whilst following work instructions?</i>	
7.	<i>Do you believe you are likely to complete a full time, four month training and employment programme successfully?</i>	

Applicant Contact details.....

If you have ticked all the above please submit by post or electronically to –

Jamie Parkes – Bounce Back Project Co-ordinator.

Address: POP Brixton, Unit L05, 49 Brixton Station Road, London SW9 8PQ

Email: jamie@bouncebackproject.com