



# Self Referral

## Ruah Inreach Local Teams Supporting People's Social and Emotional Well Being

<b>Date</b>	
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<b>Name</b>			
<b>date of birth</b>			
<b>Home Address</b>			
		<b>Post Code</b>	
<b>Phone Number</b>			
<b>Email</b>			

The best way to contact me is by:

- Home phone                       Mobile phone                       Email                       Letter  
 Please **do not** leave a message                       Please **do not** leave a message

<b>My country of birth is</b>					
<b>I am an Aboriginal</b>	Yes	No	<b>I am a Torres Strait Islander</b>	Yes	No
<b>My first language/dialect is</b>			<b>I also speak</b>		

**I am interested in the Inreach service because I:**

- Feel sad and/or depressed                       Feel anxious/stressed                       Hear voices / see things  
 Have trouble thinking straight                       Feeling/thinking suicidal                       Feel there is no hope

Other \_\_\_\_\_

**I would like Inreach to support me to:**

- Nurture my spirit                       Improve my relationships                       Look after my social/emotional wellbeing  
 Improve my physical health                       Look after my mental health  
 Find a job                       Get out more and meet people

Other
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Your Signature

You can give this Self Referral form to a Ruah Inreach worker

OR You can post this Self Referral form to

Ruah Community Services  
 C/O Senior Mental Health Program Manager  
 GPO Box 2828 West Perth 6872

Once we receive this Request for Information we will contact you.

**For more information and brochures visit [www.ruah.com.au](http://www.ruah.com.au)**