

Financial Capability and Wellbeing Program Referral and Induction Form

Our Financial Capability and Wellbeing Program aims to build financial knowledge, skills and confidence and to support actions that develop a person's financial wellbeing. We work one on one with a client and deliver workshops to build longer-term capability to better manage money and make informed financial decisions. The program is funded to support:

- people in receipt of a Commonwealth social security benefit, allowance or payment, or
- newly arrived migrants/ refugees/ non-citizens, or
- women experiencing family violence.

SECTION 1	Referre	r Info	rmati	on	Referral Date								
Referring agency													
Referrer's Name							Referrer's Title						
Phone							Email						
	l.												
SECTION 2	Particip	ant In	nform	ation									
First Name							Surname						
Pronoun	☐ She/l			him □ They/th	n □ They/them				☐ Yes ☐ No ☐ Do not wish to disclose				
Date of Birth							Phone						
Street Address											Postcode		
Email Address													
Indigenous Status	☐ Abor	_		orres Strait Islan er	nder		Country of Birth	1					
Main language	☐ Fnøli	English □ Indigenous language					Language						
spoken at home	☐ Language other than			_			Interpreter?	Ye	Yes		No		
Further Participant De	etails												
Does the client have o	ne or mo	re of	the fo	llowing impain	ments, co	nditio	ns or disabilities	?					
Intellectual learning			Psychiatric			□ Sensory/Sp			eech				
Physical/diverse			Not stated				None						
Main source of incom	e												
Salary or wages				Govt paymer	nts		□ Self-emp			oyed			
Other (e.g. super)			No income					Not stated					
Household composition	on -												
			e with dependents			Couple		Couple	with d	ependents			
Group (related adults) Group			up (unrelated	adults)		Homeless		Not sta	ted				
	•				,								
- CO				C	``								
Office Use Only Verbal consent certification (see over)													
I certify that verbal consent was provided from													
Name of Good Shepherd Employee			Signature	Signature of Good Shepherd Employee					Date				

Last updated date: 11/11/2020

Due for review: 1/10/2023



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SECTION 3 Consent to Participate

- The Financial Capability and Wellbeing program is free and voluntary. It will involve an assessment of your financial situation, gathering information, providing options to help you identify the best course of action.
- Financial coaches are not financial advisors, lawyers or accountants. Your coach provides information for learning purposes only. It is not financial advice and cannot be relied upon as financial advice.
- Financial coaches will not provide therapeutic counselling, or sell or recommend any financial product/service.
- Good Shepherd Australia New Zealand does not accept responsibility for any loss, damages or injury, financial or otherwise, suffered by anyone acting or relying on information provided.
- As part of our reporting process Good Shepherd seeks your consent to provide information to the referring agency named above on whether you have engaged in the coaching experience or not.
- No details of any of the discussions you have with your Coach will be shared with the referring agency as part of this information sharing.

SECTION 4 Consent to the collection and use of personal information - Good Shepherd Australia New Zealand

- In order to be able to provide you with assistance, Good Shepherd will store information about you.
- If you choose not to provide information as requested, it may not be possible for us to service your needs.
- Your privacy is important to us, and we have developed a privacy policy which describes how we collect, use, store and dispose of your personal information. You can find a copy of this on our website or we can email you a copy. You can request this at any time you are speaking to us.
- Information we collect may also be used for research and evaluation of the program, but not in a way that identifies you.
- We may be obliged to disclose information to other parties including where required by law & for quality/compliance auditing.
- From time to time we report de-identified data to our partners and funders, including federal and state governments. This reporting does not contain any personal information about you.
- Your information will be stored securely on GSANZ systems and/or a system operated by InfoXchange, an Australian company that provides our record keeping system. Only people who need the information for their job and who have permission can look at your information.
- You may request to view the information we hold about you (but not about someone else) and correct it if it is inaccurate by contacting your financial capability coach.

SECTION 5 Consent to the collection and use of personal information - Department of Social Services

- De-identified information will be stored on a database called "Data Exchange". This system is hosted by the Australian Government Department of Social Services. Your personal information that is stored by the Department on the Data Exchange will only be used by us for the purposes of managing your case.
- The Department de-identifies and aggregates data in the Data Exchange to produce information for policy development, grants program administration, and research and evaluation purposes. This includes producing reports for sharing with organisations. This information will not include information that identifies you, or information that can be used to re-identify you, in any way.
- You can find more information about the way the Department will manage your personal information in the
 Department's APP privacy policy, which the Department has published on its website. This policy contains
 information about how you may access the personal information about you that is stored on the Data Exchange
 and seek correction of that information. This policy also includes information about how you may complain about
 a breach of the Australian Privacy Principles by the Department, and how the Department will deal with your
 complaint.

Do you understand the information you have just heard or read?						
Do you consent for us to collect and share your information on these terms?						
Signature of participant	Date					