



Application form for a Young Carers Card



To be completed by a Trusted Referrer

Please read the FAQ's and guidance notes before completing this form and make sure you answer all of the questions and sign the form before sending it to us.

About You (the trusted referrer)	
Name	
Job title	
Which organisation do you work for?	
Telephone	
Email	
What is your relationship to the young carer?	

About the Young Carer			
Forename:			
Surname:			
Date of birth:			
Address:			
Postcode:			
Telephone:			
Email:			
What is their main language?	Welsh <input type="checkbox"/>	English <input type="checkbox"/>	Bilingual <input type="checkbox"/>

What language do they want to use for communications?	Welsh <input type="checkbox"/>	English <input type="checkbox"/>	Bilingual <input type="checkbox"/>
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Who does the young carer help to care for?	
Forename:	
Surname:	
Date of birth:	
Address:	
Postcode:	
Telephone:	
Is this person their:	Mum <input type="checkbox"/> Dad <input type="checkbox"/> Brother <input type="checkbox"/> Sister <input type="checkbox"/> Grandparent <input type="checkbox"/> Other (please state who)

Young Carers Information Service		
<p>By applying for a Young Carers Card the young carer will automatically become a member of the Young Carers Information Service.</p>		
Are they happy to be sent useful information relevant to young carers by email?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do they understand that they can change these preferences at any time by emailing YoungCarersSupportTeam@rctcbc.gov.uk?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do they understand that they can read about how we use their personal information at: www.rctcbc.gov.uk/dataprotection	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Consent		

<p>If the young carer is under 18 we need their parent/guardian's consent to issue a YC Card. Please can the young carer ask their parent/guardian to complete the section below:</p>	
<p>Parent/Guardian Name:</p>	
<p>Phone number:</p>	
<p>Parent/Guardian signature:</p>	<p><i>Please note, we are unable to accept an application for a YCID card without parent/guardian consent</i></p>

<p>PHOTO GUIDELINES</p>
<p>Please provide a good quality photo (head & shoulders) of yourself to be used on the card. The picture can be taken on a phone or other device.</p> <p>Please email the photo to YoungCarersSupportTeam@rctcbc.gov.uk</p> <p>Please ensure the photo:</p> <ul style="list-style-type: none"> • Is a recent colour photo • Is of you alone (no other people or pets) • Is taken against a pale background • shows you facing forwards with your head and shoulders in the photograph • shows your full face <p>If there are any issues with your photo we will contact you</p>

<p>Please sign and date the form</p>	
<p>Do you certify that this young person is a Young Carer who meets the following eligibility criteria:</p> <ul style="list-style-type: none"> • The Young Carer is aged under 18 • The Young Carer helps to look after a family member who has a disability, physical or mental illness or is affected by substance or alcohol misuse. • The Young Carer lives in Rhondda Cynon Taf. 	
<p>Signature of trusted referrer</p>	

Date:	

Please check that you have answered all of the questions and return the form and photo to:

Email: YoungCarersSupportTeam@rctcbc.gov.uk

OR

Carers Support Project
11-12 Gelliwastad Road
Pontypridd
CF37 2BW

