RAILS
REFUGEE & IMMIGRATION
LEGAL SERVICE INC

ADVICE ☐
LEGAL TASK ☐

NO:

DATE OF SERVICE or REFERRAL:

Mode of service:

In person: EAS ☐
In person: Daytime advice ☐
Phone advice ☐
Mail advice ☐
Outreach advice: _____ ☐

CLIENT DETAILS

First Name:	**D.O.B:**
Surname:	**Phone:**
Address:	**Post Code:**
Gender: Male ☐ Female ☐	**Country of birth:**
Language spoken at home:	**Current visa:**
Requires Interpreter: Yes ☐ No ☐	**Date of arrival in AUS:**

Spoken English: Very well ☐ Well ☐ Not well ☐ Not all all ☐ Not stated ☐

Written English: Very well ☐ Well ☐ Not well ☐ Not all all ☐ Not stated ☐

Aboriginal or TSI: No ☐ Yes, Aboriginal ☐ Yes, TSI ☐ Both ☐

Disability: No ☐ Yes ☐ If yes, describe:

Family type:
Two parent family with dependent children ☐ No. of dependents _____
Sole parent family with dependent children ☐ No. of dependents_____
Not living in a family (shared house, hostel, alone) ☐ Other:

Relationship status:
Never married: ☐ Married (de facto) ☐ Widowed ☐ Divorced ☐ Seperated ☐ Not stated ☐

EMPLOYMENT DETAILS

Status: Employed ☐ Unemployed ☐ Other:	**Centrelink income:** No ☐ Yes ☐ If yes, what:	**Income level:** High ☐ Medium ☐ Low ☐ No income ☐	**Income source:** Earned ☐ Government allowance ☐ No income ☐ Other:
Any Dependants:			

PROBLEM DETAILS

Description:

Other parties involved: DIBP ☐ Other party ☐ Related client ☐

Name	Date of Birth	Relationship