

Request for a Wellbeing Chat - Mental Health Support Team (MHST) in schools	
<b>Name:</b>	<b>Date of Birth:</b>
<b>Address:</b>	<b>School:</b>  <b>Name of supporting adult in school:</b>
<b>GP:</b> <b>GP Address:</b>	<b>Are your parents/carers aware of this request?</b> Yes No  <b>Would you like them to attend the Wellbeing Chat with you?</b>  Yes No
<b>Please describe the reason you are seeking help?</b>	
<b>What do you hope this Wellbeing Chat will bring you?</b>	
<b>What strengths do you draw upon that currently helps you with this situation?</b>	

Is there anything else that you want to share with us at this point?

Your Signature:

Date:

Your preferred contact phone number:

**For assistance completing this form or to discuss this request with a member of our team, please contact:**

**David Plummer - Clinical Team Manager**  
Mental Health Support Team for Schools.  
**07866159124**

**Once completed please send this form to us at:**

**Mental Health Support Teams in Schools  
Children and Family Health Devon  
Single Point of Access Team  
1a Capital Court  
Bittern Road  
Sowton Industrial Estate  
EXETER  
EX2 7FW**

**Note of caution: we want to keep your information secure. If you would prefer to email us this form please ring us on 03300 245 321 and we will contact you.**

**Children and Family Health Devon  
Single Point of Access Team  
1a Capital Court  
Bittern Road  
Sowton Industrial Estate  
EXETER  
EX2 7FW**