Friendship client 

The information gathered with this form will be transferred to the Red Cross voluntary friend service’s client register. The register’s privacy policy is available at <https://www.redcross.fi/dataprotection>. The information is primarily used for communications regarding the voluntary friend service.

Consent from the client or their legal guardian FRIENDSHIP TYPE  
for saving the information ☐ Face-to face friend

☐ Online friend

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature and name in block letters

Personal information

GENDER ☐ Female ☐ Male ☐ Other

|  |  |  |
| --- | --- | --- |
| First name: | Last name: | |
| Street address: | Post code: | Town: |
| Phone: | Email: | |
| Phone: |  | |
| Date of birth: \_\_\_\_/\_\_\_\_ \_\_\_\_\_\_\_\_\_ | First language: | |

LANGUAGE SKILLS

☐ Finnish ☐ Somali

☐ Swedish ☐ Farsi

☐ English ☐ Arabic

☐ Russian ☐ Ukrainian

OTHER LANGUAGES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CLIENT TYPE:

☐ Family with children ☐ Mental health rehabilitee

☐ Informal caregiver ☐ Intellectually disabled

☐ Person with a memory disorder ☐ Immigrant

☐ Client with an injury or impairment ☐ Client who lives in an institution

OTHER DETAILS (e.g. type of limitation)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

THE CLIENT’S INTERESTS

☐ Culture ☐ Exercise ☐ Watching sports

☐ Nature ☐ Crafts ☐ Animals

☐ Cooking ☐ Travelling ☐ Computer games

☐ Music ☐ Beauty ☐ Shopping

☐ Reading ☐ Motor vehicles ☐ Outdoors activities

THE CLIENT’S OTHER INTERESTS, EDUCATION AND WORK HISTORY

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferences regarding the friend

☐ The client may be assigned with several volunteer friends

PREFERRED GENDER PREFERRED AGE

☐ Male ☐ under 18

☐ Female ☐ 18–29

☐ Other ☐ 30–45

☐ 46–65

☐ 66–79

☐ 80+

PREFERRED TIME FOR MEETING/CONTACT

☐ Weekday mornings MEETING FREQUENCY

☐ Weekdays during the day

☐ Weekday evenings ☐ Once a week

☐ Weekend mornings ☐ Every two weeks

☐ Weekends during the day ☐ Once a month

☐ Weekend evenings ☐ Less than once a month

FURTHER INFORMATION ON THE MEETING TIMES OR CLIENT PREFERENCES:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Communication devices of the online friend:

Contact person’s contact details, if applicable

|  |  |  |
| --- | --- | --- |
| First name: | Last name: | |
| Street address: | Post code: | Town: |
| Phone: | Email: | |
| Date of birth: \_\_\_\_/\_\_\_\_ \_\_\_\_\_\_\_\_\_ | Relationship with client | |

OTHER CONTACT PERSON AND CONTACT DETAILS, IF APPLICABLE:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BRIEF DESCRIPTION (DISPLAYED IN THE VOLUNTARY FRIEND SERVICE)

☐ Interview completed

Name of the interviewer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Interview date: \_\_\_\_/\_\_\_\_\_ 20\_\_\_\_\_\_\_\_

On a break

Further information about the break: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

End of the break: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

☐ Recommended for group activities

☐ Unsuitable for activities based on the Red Cross’s principles

Notes:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_