

## **Migrant Help Asylum Services**

## **Consent Form - Third Party**

(To be explained by an adviser and signed by the service user if they agree with the third-party agency to contact Migrant Help on their behalf)

Name of main applicant:	
Migrant Help Reference Number:	
Port or NASS Reference:	
Date of birth:	
Address:	
Named agency:	
<u> </u>	above-named organisation to contact Migrant Help to discuss my Migrant Help file and make half.
Signature of the main applicant:	
Date:	
Translated to client with the aid of a	n interpreter? Yes 🗖 No 🗖

