# Self-referrals: Findings by other bodies

Use this form to tell us if your fitness to practise has been found to be impaired by a professional or regulatory body. This includes regulators outside of the social work profession.

Section 1 – Information about you

Your name

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Your Social Work England registration number

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Your date of birth

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|  |

Your address

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|  |

Town

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|  |

Postcode

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Country

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|  |

Telephone number

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Email address

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Section 2 – Details of other body’s finding

Name of regulatory body\*

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Your registration number with the above regulatory body

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Name of contact person at above regulatory body

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Address of regulatory body

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Town

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Postcode

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Country

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Telephone number

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Email address

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Date of decision

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Details and outcome of fitness to practise case (e.g. suspended, removed from register)

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Please provide any other information that will help us to understand the circumstances that led to the decision.

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Please provide us with copies of any supporting documents along with this form.

Completed forms and any supporting information should be emailed to:

triage@socialworkengland.org.uk

Alternatively, you can post your completed form to the following address:

Social Work England – Triage Team
1 North Bank
Blonk Street
Sheffield
S3 8JY

You may want to consider sending it as Recorded Delivery or Signed for Delivery.

If you wish to know more about how we will use your information, please see our guidance on how we use personal information when considering concerns about social workers:

<https://www.socialworkengland.org.uk/concerns/guidance-documents>