



# Housing & Social Services Department



## MONITORING FORM – ASYLUM SEEKERS

FORM ASI

CLIENT (Surname)			First Name(s)
Nationality			Date of Birth
Language(s) spoken			
Religion (if known)			
Country of residence prior to arrival in UK			
Date of Entry to UK		Place of entry:	
Referred By			
Name of Social Worker			Office base:
SWIFT Reference			
Tick relevant box	Port of Entry		In Country applicant

Delete as appropriate: Unaccompanied Child			
	<i>Tick relevant boxes</i>	YES	NO
SAL.1 (eligible for benefits)			
SAL.2 (not eligible for benefits)			
IS 96 (Home Office Notification of temp admission)			
IS151A (Immigration – illegal entrant - temp admission –not eligible for benefits)			
Notice Of <b>Appeal</b>			
Has an <b>Interpreter</b> been arranged? Specify language used :-			
Check with <b>Benefits Agency</b> ?			
Name of <b>GP</b> ?			
Name & Address of <b>Solicitor</b>			
Additional services required (i.e. English language tuition,etc)	Interpreter required		

<b>REVIEW DATE for Reassessment of Payment/Status</b>	/ /
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### Accommodation Details

ADDRESS: 10 Felix Road, Easton, Bristol			
Weekly Cost of Accommodation			
Indicate type of provision		B & B	
Weekly Living Expenses (cash and vouchers)			

<b>COMPLETED BY:</b>		
SIGNATURE		Date:



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