**Initial Decision Proforma**

**Decision whether to complete an Age Assessment**

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|  | If a photo has been taken, please attach or inset it into this document |
| Self Stated Date of Birth and age in years: | Home Office Date of Birth and age in years:  |
| Nationality :  | Language:  |
| Has interpreter been used?If ‘no’ – explain why: |  |
| Port Ref No : | Home Office Ref No :  |
| Name & Address of Local Authority Undertaking Initial Visit :Derby City Council People's ServicesChildren in Care TeamCouncil HouseCorporation StreetDerbyDE1 2FS |
| Names of Workers :  | Date of Visit : |
| The purpose of this Initial Visit is to decide whether an assessment of age is necessary. Is the person presenting *clearly and obviously a child*? Is the Person Presenting *clearly and obviously an adult*?\*Is the *person’s age in doubt*? \* If the person’s age is in doubt, the Local Authority will make necessary arrangements in order to undertake Merton compliant Age Assessment. |
| Signature: Worker One  |
| Signature: Worker Two |
| It was explained to you at the end of your interview that you have the right to disagree with the outcome of the visit and to challenge our decision; you may do so by contacting a Solicitor or by requesting the ‘Complaints Procedure for Children & Young People’. |