**Port Ref:** **/**

Assessment of age following a full interview

To be given to the person when assessment has been made so that this may be passed on to relevant agencies.

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| --- | --- | --- | --- |
| Person and worker details | | | |
| Person decision was made  on and nationality: | Name: | |  |
|  | Nationality: | |  |
| Date the decision was made: |  | | |
| Workers completing the interview: | 1. |  | |
|  | 2. |  | |
| Area team: |  | | |
| Interpreter: |  | | |
| Language: |  | | |

|  |  |
| --- | --- |
| Decision | |
| Date of birth or age assessed: |  |
| You have stated that you are a under the age of eighteen and age assessment interview has been completed. It has been agreed by two workers from Lincolnshire County Council, through the use of this assessment that you are the age/date of birth stated above. Following this decision you eligible for support from Children’s services.  If you are not happy with this decision then please take this document to your solicitor once they have been appointed. However unless further information or evidence is available to support your claimed age, Lincolnshire Children’s services are not at liberty to change this current decision. | |

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| Contact details |
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| --- | --- | --- | --- | --- |
| Signed: |  | Date: |  | (Worker 1) |
|  |  |  |  |  |
| Signed: |  | Date: |  | (Worker 2) |