

From : Officer-in-charge  
\_\_\_\_\_ Integrated Family  
Service Centre  
Ref.: \_\_\_\_\_  
Tel. No.: \_\_\_\_\_  
Fax. No.: \_\_\_\_\_  
Date: \_\_\_\_\_

To: Supervisor  
Caritas Family Crisis Support Centre  
Ref.: \_\_\_\_\_  
Tel. No.: 2383 2122  
Fax. No.: 2383 2231  
Total pages: \_\_\_\_\_

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**Request for Extension of Stay**

Name of Client: \_\_\_\_\_  
HKID No.: \_\_\_\_\_  
Sex / Age: \_\_\_\_\_

The above-named client has been admitted to your Centre since \_\_\_\_\_ (*date*).  
I write to request for extension of his / her\* stay for \_\_\_\_\_ more days to \_\_\_\_\_ (*date*)  
due to the following reason(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

Follow-up plan: \_\_\_\_\_  
\_\_\_\_\_

Remarks (if any): \_\_\_\_\_  
\_\_\_\_\_

For case discussion, please contact the responsible social worker, Mr / Ms / Miss / Mrs\*  
(*name of Responsible worker*) \_\_\_\_\_, at phone  
no. \_\_\_\_\_.

( \_\_\_\_\_ )  
Officer-in-charge  
\_\_\_\_\_ Integrated Family Service Centre

\*please delete as appropriate