



## Caritas Family Crisis Support Center

From: Officer-in-charge

\_\_\_\_\_  
(Name of referring agency / centre)

Ref.: \_\_\_\_\_

Tel. No.: \_\_\_\_\_

Fax. No.: \_\_\_\_\_

Date: \_\_\_\_\_

To: Supervisor

Caritas Family Crisis Support Center

Ref.: \_\_\_\_\_

Tel. No.: 2383 2122

Fax. No.: 2383 2231

Total pages: \_\_\_\_\_

### Request for Extension of Stay

Name of Client: \_\_\_\_\_

HKID No.: \_\_\_\_\_

Sex / Age: \_\_\_\_\_

The above-named client has been admitted to your Center since \_\_\_\_\_ (date).

I write to request for extension of his/her\* stay for \_\_\_\_\_ more days from \_\_\_\_\_  
to \_\_\_\_\_ 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 IFSC Worker) at phone no. \_\_\_\_\_

\* Please delete as appropriate

( \_\_\_\_\_ )  
Officer-in-charge

\_\_\_\_\_  
Name of Referring Agency / Centre