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 westernyouthnetwork.org

YOUTH REFERRAL FORM

All information included on this form will be kept confidential and is for agency use only.

Referring Agency _____ Phone _____ **Referral Date:** _____
 Name and Title of Referral Source: _____
 Signature of Referral Source: _____
 Signature of Person Completing this Form: _____
 Program You are referring youth to:
 Mentoring
 Middle School After School Program
 Summer Programming
 Parenting Workshops (for child's Parent/Guardians)
 Prevention

Child's Name _____ DOB _____ Age _____
 SSN _____ School _____ Grade _____
 Gender _____ Race _____ Height _____ Weight _____
 Parent/Guardian Contact Number _____ Cell _____
 Address _____
 Directions to Home _____

PREVENTION CURRICULUM REFERRALS WILL COMPLETE ONLY FRONT PAGE

Eligibility Status (please mark appropriate box with and "X")
 A child or adolescent, under the age of 18 who is determined to be at an elevated risk of substance abuse, but is not deemed high-risk who:
 is currently experiencing documented school related problems or educational attainment difficulties including school failure, truancy, suspension, or expulsion. This criterion is broad and can include students who do not necessarily have behavioral problems.
 has documented negative involvement with Law Enforcement or the courts including formal and informal contacts such as arrests, detention, adjudication, warning, or escort.
 has one or both parents/legal guardians, or caregivers, who have had one or more documented child abuse or neglect reports, or investigations, or substantiations involving DSS.
 has one or both parents/guardians who have a documented substance related disorder.
 Explain any items marked "yes" _____

Office Use Only: Risk Level _____

SCHOOL INFORMATION

Is the youth currently enrolled in school? YES NO

School Name: _____

School Principal: _____ School Counselor: _____

Does the youth read at current grade level? YES NO

Does the youth write at current grade level? YES NO

Does the youth perform at current grade level in Math? YES NO

Describe any challenges with academics, behavior, and/or attendance.

YOUTH INFORMATION

What are the youth's interests, hobbies, favorite sports, and activities? _____

If the youth is being referred to the mentoring program, what type of volunteer mentor could best serve this child? _____

What needs might the volunteer best meet? _____

Are there any special problems a volunteer should know about? _____
