



# REFERRAL FORM

## ACADIA YOUTH HOUSING STABILIZATION PROGRAM

For information call 250 376-3660  
Fax referral to 250 376-3040

<b>Referral Source:</b>		<b>Referral Date:</b>	
<b>Name:</b>		<b>Gender:</b>	
<b>Date of Birth:</b>		<b>Pronoun:</b>	
<b>Cultural Background:</b>		<b>Primary Language:</b>	
<b>Address:</b>		<b>Telephone</b>	
		<b>Home</b>	
<b>Postal Code:</b>		<b>Cell</b>	
<b>Current Housing Situation:</b>			

<small>*if under 19</small>	<b>Parents/Guardian</b>	<b>Comments</b>

<small>*if under 19</small>			<b>Southill MCFD</b>		<b>Secwepemc Child &amp; Family</b>	
<b>Social Worker:</b>			Battle St MCFD		Lii Michif	
<b>Phone:</b>						
<b>Is the youth in care?</b>	Y	N				
<b>Legal Status</b>					<b>Open YS or FS file?</b>	
<b>Source of Income:</b>				<b>Monthly Amount:</b>		
<b>Probation Order?</b>	Y	N	<b>Probation Officer:</b>			
<b>No Contact Order?</b>	Y	N	<b>With Who</b>			

Presenting Needs and Concerns of the Youth					
<b>Safety Issues within the Home</b>		<b>Emotional/Physical Well being</b>		<b>Life Skills</b>	
• neglect		• stress		• school	
• violence within the family		• depression		• employment	
• abuse (physical, emotional, sexual)		• anxiety		• budgeting	
		• grief and loss		• basic care	
<b>Violence</b>		• trauma		• food	
• victim		• mental health			
• perpetrator		• suicidal thoughts/actions		<b>Communication Skills</b>	
• witnessed as a child/youth		• self esteem		• problem solving	
Is the violence current or historical?		• nutrition		• communication	
				• anger	
<b>Current Safety Risks</b>		<b>Family Relationships</b>		• conflict	
• sexual exploitation		• establish			
• addiction		• strengthen		<b>Community Resources</b>	
• street entrenchment		• maintain		• knowledge of	
• criminal activity				• accessing	
<b>Additional Referral Information:</b>					

<b>VAT Assessment Completed:</b>	<b>Y</b>	<b>N</b>	<b>Copy of VAT attached:</b>	<b>Y</b>	<b>N</b>
<b>Youth's Goals</b>					
1.					
2.					
3.					
<b>Current Services Involved:</b>					
<b>Past Services Involved:</b>					
<b>Is youth aware of this referral?</b>	<b>Y</b>	<b>N</b>	<b>If no, explain:</b>		

**Office use**

<b>Date referral received:</b>	
<b>Date youth put on housing waitlist:</b>	
<b>Discontinued due to refusal of service: Y</b>	<b>Date:</b>
<b>Reasons:</b>	
<b>Alternatives offered:</b>	