



Prince's Trust

Referral Form

LEFT COMPULSORY EDUCATION

Please provide as much detail as possible on this form when you are referring a young person onto a Prince's Trust programme. It helps us assess whether the programme is appropriate for their needs, and allows us to adjust our support as relevant for each young person.



YOUNG PERSON DETAILS

Name:	Date of birth:
Address:	
Phone number:	Email:
Prince's Trust programme being referred to:	



REFERRAL AGENCY DETAILS

Referral agency:	
Type of agency:	
Name(s) of worker(s):	
Address:	
Contact number:	Email:
Does the young person have any other workers allocated to them from different agencies? If yes please give details:	



BACKGROUND DETAILS ABOUT THE YOUNG PERSON

Reason for Referral

Why do you wish to refer the young person to The Prince's Trust?

Current Situation

Employment status (tick as appropriate):

Not working at all Working 16 hours or less per week Working more than 16 hours per week

If unemployed, how long for:

Education status (tick as appropriate):

Not in education In education or training less than 12 hours per week
In education or training 12 hours or more per week

Family Situation and Social Services

Not applicable

What is the young person's housing or family situation?

Please give details of any Social Services involvement with the young person?

Mental Health Needs

Not applicable

Please give details if the young person has any mental health needs:



BACKGROUND DETAILS ABOUT THE YOUNG PERSON (continued)

Disabilities

Not applicable

Please give details if the young person has a disability:

Learning Needs

Not applicable

Please give details of any statement of educational needs/special needs/learning difficulties etc and/or problems with reading, writing or maths:

Rating level of educational support need: Low Medium High

Addiction Issues

Not applicable

Does the young person have any issues with the below?

Drug use. Please give details:

Alcohol. Please give details:



BACKGROUND DETAILS ABOUT THE YOUNG PERSON (continued)

Offending Background

Not applicable

If the young person is an offender, please read '[Working with Offenders Policy](#)' and provide the following details:

Details of any unspent convictions:

Were any of the unspent convictions for :

Serious violence

Arson

Sexual offences

Offences against children

Date of last conviction:

Length of sentence:

Number of prison sentences:

Is there a risk of the young person re-offending?

Yes

No

If yes, please rate level of risk:

Low

Medium

High

Has the young person been in trouble with the police?

(i.e. never been convicted but has been getting in trouble and starting to enter the criminal justice sector)

Custody Details

Not applicable

If the young person is an offender, please read '[Working with Offenders Policy](#)' and provide the following details:

Young Offender Institution or prison name:

Prisoner number:

Earliest date of release:

Contact address on release:

Is the young person subject to any electronic monitoring requirements?

Yes

No

Is the young person subject to a curfew?

Yes

No



BACKGROUND DETAILS ABOUT THE YOUNG PERSON (CONTINUED)

Any other information

Not applicable

Is there anything else you think we should know?

(e.g. membership of a gang, anger management issues, victim of bullying, bereavement, debt issues etc)

Any known triggers for behaviour, health etc:

Any strategies that you have found successful:

Please sign or type your name here to confirm that you understand that the information that you are providing is being collected under the Data Protection Act 1998. It will form part of the young person's file and if the young person requests to see information that The Prince's Trust holds on them, under the Data Protection Act 1998, we would release this information.

Name:

Date: