

(R2020-05)

To refer someone to the Youth at Risk Development Program, please fill out this referral form. Provide as much detail as possible to ensure a full understanding of the gang risks associated to the referred youth. Referrals are triaged on a monthly basis. You will be notified if this referral has been accepted into the YARD program. If not appropriate, other programs may be recommended that may suit the youth's needs.

Referral Information

Referred by*

Date of referral

Relationship to youth

Referral source phone number*

Referral source email*

Referral source/Organization

Reason for referral*

(Please provide specific information regarding the youth's risk of gang involvement)*

Who is aware of the referral to YARD?

Youth

Parent/Guardian

Primary eligibility factors

Escalation of criminal involvement, seriousness of offences/violence since first offence At least 1 charge in which weapons were used or a charge relating to sale of drugs Suspected or admitted gang member or associate, even if no criminal involvement All or almost all friend in negative peer group, including criminal involvement Immediate family member engaged in criminal activity

Known gang recruitment

Secondary eligibility factors

Known gang recruitment at school

Known/suspected use of weapons by youth at school or youth has access to weapons Gang ideation, even if no actual gang connection, no criminal history and no other risk factors

Additional eligibility factors

Age under 15 at first offence

At least 1 incident resulting in at least 1 summary conviction charge (minor offence, eg. Theft under \$5000, Property damage under \$5000)

At least 1 incident resulting in at least 1 indictable charge (more serious offence, eg. Theft over \$5000, Assault Causing Bodily Harm)

No positive adult role model/confidant/mentor

No friends

Has friends but mixed negative and positive peer groups

Serious family dysfunction/spousal violence/child abuse or neglect

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Additional eligibility factors (continued)

Chronic family poverty

Not living with parents/in foster or kinship chare or on his own

Lax parental supervision, lack of poor discipline practices

Aggression/behaviour problems (including bullying)

Lack of emotional regulations and self control

Mental health problems (including depression, anxiety, along with more serious disorders)

At least 3 school suspensions or at least 1 expulsion or not attending school right now

Poor school performance and/or attendance, not on track to graduate

Alcohol or drug misuse

Anti-social values/beliefs

Participates in high risk sexual activity

Immigrant or refugee from a war-torn country

Poor ethno cultural identity

Youth Information

Youth: Surname* Given Name(s)*

Youth address*

Youth phone number Youth cell phone number

Male Female Other/Unknown Youth email address Gender*:

Date of birth* Approx. Age:

Population group*

Country of birth* Year of arrival in Canada (if applicable) Don't know No Yes

Is English a second language for the youth?

Primary language spoken at home

Current school status

Last attended school

If the youth is not attending school, when did they last attend Year Month

> Anticipated return to school date, if any. Month Year

School currently attending or last attended

Current grade or last grade attended

Any previous suspensions? Yes No If yes, how many?

If yes, years in which they occurred?

Any previous expulsions? No If yes, how many? Yes

If yes, years in which they occurred?

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Has the youth ever had a paid job? Yes No

Current employment status:

Working >35 hours/week

Working <35 hours/week If working <35 hours/week, how many hours:

Not working.

If employed, place of employment

Health Issues

Provide details about any suspected or diagnosed health issues, including any counseling or treatment received, any medication taken, and doctor information. Please include IQ, if known.

ADD/ADHD	Suspected	Diagnosed
FASD	Suspected	Diagnosed
Physical disability(ies)	Suspected	Diagnosed
Mental health issue(s)	Suspected	Diagnosed
Substance abuse	Suspected	Diagnosed
Conduct disorder	Suspected	Diagnosed
Learning disability	Suspected	Diagnosed
Other	Suspected	Diagnosed

Youth lives with

If other, please provide the name

Child and Family Services status

If other, please provide Status or other Service's name

Does the youth have a criminal record or has the youth been charged with a criminal offense? Yes No Don't Know

If yes, please provide details

Name of probation officer (if applicable)

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Is the youth receiving help from any other program or service? Yes No Don't Know If yes, which program/service?

Does the youth want to participate in YARD? Yes No Don't Know

If No or Don't Know, why not?

We would encourage you to engage the young person to make them aware of the YARD Program.

Parent/Guardian full name

Parent/Guardian address

Parent/Guardian phone number Cell phone number

Email address Is English a second language? Yes No Don't Know

What is the parent/guardian's primary language(s) spoken?

Does the youth's parent/guardian want the youth to participate in YARD?

This personal information is being collected under the authority of section 33(c) of the FOIP Act RSA 2000 and will be used by the City of Calgary and the Calgary Police Service to determine eligibility for YARD. The child's personal information will also be used to administer and evaluate YARD and for contact purposes regarding other programs or services for which the child may be qualified. All information collected is protected by the provisions of the FOIP Act RSA 2000. You may direct questions about the collection, use or disclosure of your personal information by this program by calling the YARD Information Line at 403-428-8409.

All mandatory fields noted with a red asterisk (*) or <u>red border</u> must be completed before submitting this form. When you are ready to submit, click on the "Submit form" button below.

Alternatively, you may save this form and attach to an email. Email to: yard@calgarypolice.ca

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