**Youth on Track**

**Discretionary Referral Form – Police, Youth Justice or Solicitors**

This information is exchanged under section 66 of the *Young Offenders Act 1997* and section 16A of the *Children and Young Persons (Care and Protection) Act 1998*

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| **Question**  | **Response** |
| **Name of young person** (include any known alias) |  |
| **CNI Number** |  |
| **Gender & Date of Birth** | Male / Female DOB: \_\_\_ / \_\_\_ / \_\_\_ |
| **Aboriginality** (please circle) |  Aboriginal Non-Aboriginal  |
| **Address** |  |
| **Contact number** | (h) (m)  |
| **Carer’s name (s) *and relationship to young person*** |  |
| **Carer’s contact number** | (h) (m) |
| **Most recent formal contact with Police** (circle one) |  Caution Court Conference  |
| **Most recent offence/s** |  |
| **Number of prior cautions** (before the most recent offence above) | N = |
| **Number of prior charges**(before the most recent offence above) | N =  |
| **Number of prior Conferences**(before the most recent offence above) |  N= |
| **All prior offences** (if known) |  |
| **Future caution dates**(if known) | \_\_ / \_\_ / \_\_ at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Police Station |
| **Future court dates**(if known) | \_\_ / \_\_ / \_\_ at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Children’s Court |
| **Referred for Youth Justice Conference**(if known) | Referred on \_\_ / \_\_ / \_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Youth Justice Community Office |
| **Known risks of young person** *Young person must have at least* ***three*** *of the risk factors to be eligible for referral* |

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| --- | --- |
| Truancy  |  |
| Aggressive/Violent behaviour at school/home |  |
| Antisocial peer association |  |
| Concern in relation to parental supervision |  |
| Substance abuse |  |
| Family history of domestic violence |  |
| Homeless or independent living |  |
| Child at risk reports |  |
| Family with pro criminal behaviour |  |
| Exiting custody from remand (which centre): |  |
| Other (please specify):  |  |
| Other (please specify):  |  |

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| **Known safety risks in relation to young person and their home environment** (e.g. young person may carry a weapon, excessive alcohol used by others in the house which can lead to violence) |  |
| **Other risk and needs associated with young person** (e.g.child at risk reports, unstable accommodation, disability or learning difficulties)  |  |
| **Referred by:** | Name:Position:Organisation:Date:PAC (if police referral): |

Email referral form to: youthontrack@justice.nsw.gov.au

The YoT Screening Officer will inform the outcome of referral within 3 working days.