Youth Criteria: 1) Males ages 12-17; 2) non-violent offenders; 3) want mentorship with Reel Life Inc. and are willing to be physically active; 4) Ramsey County residents.

REFERAL AGENCY INFORMATION

Name of referring staff\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position/Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Your Agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone:(\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Agency type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

YOUTH INFORMATION

Last name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Minneapolis or St. Paul proper) Zip: \_\_\_\_\_\_\_\_ D.O.B.: \_\_/\_\_/\_\_\_\_ Age: \_\_\_\_\_\_ (12-17 only) Gender Identity:\_\_\_\_\_\_\_\_\_\_\_ Pronouns:\_\_\_\_\_\_\_\_\_\_\_\_\_ Caregiver(s) Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ More than one parent involved Y/N Relationship to youth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home phone: (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Youth’s Primary Language:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Caregiver email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Caregiver’s Primary Language: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ethnicity:

❏ American Indian/Alaska Native

❏ Asian ❏ Black/African American

❏ Hispanic or Latino (of any race)

❏ Native Hawaiian and Other Pacific Islander

❏ Other Race

❏ White/Caucasian

Primary Enrollment Reason (only select one):

❏ Academic Challenges ❏ Children of Incarcerated Parents ❏ Family Stress/Risk ❏ Homelessness ❏ Labor Trafficking ❏ Lack of Social Skills ❏ Living in high risk community ❏ Mental Health ❏ Sexual Exploitation ❏ Substance Abuse ❏ Truant/Dropout ❏ Involvement in RLI Other Enrollment Reason(s): ❏ Homelessness ❏ Involvement in JJS ❏ Labor trafficking ❏ Sexual exploitation ❏ Academic Challenges ❏ Lack of Social Skills ❏ Family Stress/Risk ❏ Living in high risk communities ❏ Children of Incarcerated Parents ❏ Mental Health ❏ Substance Abuse ❏ Truant/Dropout Protective Factors: ❏ Family Involvement ❏ Academic Interest ❏ Strong Relational Skills ❏ Community Involvement ❏ Sense of Self-Efficacy Target Populations: ❏ Youth who have experienced victimization ❏ American Indian/Alaska Native Youth ❏ Children of Incarcerated Parents ❏ Youth who Identify as LGBTQ ❏ Youth With Disabilities ❏ Youth Experiencing Labor Trafficking ❏ Youth Experiencing Homelessness ❏ Youth Experiencing Commercial Sexual Exploitation

COMMUNITY AGENCY INFORMATION

What other relevant community agencies does this youth work with?

PROGRAM CONSENT

Please initial beside each program requirement.

 \_\_\_\_\_The family has been informed of this referral.

\_\_\_\_\_The youth has been informed of this referral.

 \_\_\_\_\_The youth and family are aware that this is a one-year program

 \_\_\_\_\_ The youth will meet with their programming expectations every week.

\_\_\_\_\_The youth is aware of the requirements to attend all programming including safety training, boat safety training, water, and land programming.

PROGRAM CONSIDERATIONS

To best match your youth with RLI programming, please answer the following questions so that we may know a little bit more about them.

Why do you believe Reel Life Inc is a good fit for this youth?

What are this youth’s interests and activities?

What emotional or physical behaviors should we be aware of with this youth?

When and why do these behaviors occur?

What are this youth’s coping skills?

What aspects of Reel Life Inc is the youth excited about?

What aspects of Reel Life Inc is the youth concerned about?

How does the youth plan to participate and support programming?

How does the family plan to support our program?

What is the best way to communicate with this youth and their family?

Other comments:

Please submit referral form and we will be in contact with you once your referral for has been processed.

Thank you for your referral, feel free to contact us at info@reellifeinc.org or 651-399-0162 with any questions or concerns.