



## ALLIANCE REFERRAL SYSTEM FORM

Please email the completed form to [referral@shelteredalliance.org](mailto:referral@shelteredalliance.org).

By completing this application, you are agreeing to allow the National Trafficking Sheltered Alliance to circulate this application amongst its member agencies within 24 hours for the express purpose of facilitating a residential placement for your Candidate. This form must be filled out completely before submission. **ALL INFORMATION WILL BE KEPT CONFIDENTIAL** within the Alliance network. You will be contacted directly by any agency that has availability and is willing to consider your Candidate. ARS will not replace the assessment process of individual agencies; we are a facilitator only.

Date: \_\_\_\_\_

### Referrer

What is your relationship to the Candidate?

- Law Enforcement     Legal Counsel     Social Worker/Case Manager     Court Official  
 Safe House or Trafficking Shelter     Anti-Trafficking Agency/Task Force     Friend/Family member     Self

Referrer Name: \_\_\_\_\_

Agency Name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Contact Email: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

How long have you known the Candidate? \_\_\_\_\_ months \_\_\_\_\_ weeks \_\_\_\_\_ days

By what date do you need placement: \_\_\_\_\_

### Candidate Information

DO NOT put identifying information on this application. Your Candidate will only be identified within this Network by the person's 3 initials and age, for example: AGW21

First Initial: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Initial: \_\_\_\_\_ Age \_\_\_\_\_

If under 18, please specify:

- Emancipated     Ward of Court/State     About to Age-Out     Parent/Guardian willing to grant temporary custody   
Parent/Guardian willing to transfer legal guardianship

Gender: Male     Female     Trans

Candidate is: US Citizen     Legal Foreign National     Undocumented Foreign National

Candidate is currently residing in: City: \_\_\_\_\_ State: \_\_\_\_\_

Is the Candidate able and willing to relocate out of State?  Yes  No

Will your agency/the Candidate fund the cost of relocation?  Yes  No

Does the Candidate have any means to pay for placement (insurance, family support, disability, etc.)? Explain:

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## Legal

Yes  No Is the Candidate a victim of trafficking (either exploited as a minor, or as an adult through the means of force, fraud, or coercion), prostitution, or other forms of sexual exploitation?

What is the nature of the trafficking? Labor Trafficking  Sex Trafficking  Both

How was the trafficking activity verified?

Candidate is a minor; verification not required  Trafficking was verified by Law Enforcement or Court Official

Candidate met screening criteria for trafficking  Trafficking was disclosed by Candidate only

Trafficking cannot be verified

How recently was s/he in a trafficking situation? \_\_\_\_\_ months \_\_\_\_\_ weeks \_\_\_\_\_ days

Yes  No Does the Candidate have any outstanding warrants or legal obligations? (We advise that you conduct a public domain case search to verify.)

Yes  No Is the trafficker(s) in custody?

Yes  No Is there an open or pending case against the trafficker?

Yes  No Is the Candidate currently incarcerated? If yes, date of release? \_\_\_\_\_

Yes  No Is (or will) the Candidate be on parole/probation?

Yes  No Is the Candidate a high flight risk?

## Health

Yes  No  N/A Is there a chance she could be pregnant?

Yes  No  N/A Is the Candidate actively self-injuring?

Yes  No Is the Candidate a suicide risk?

Yes  No  N/A Does the Candidate have at least 30 days sobriety/clean time?

Yes  No  N/A Is the Candidate on prescribed pharmacology for mental illness?

Yes  No  N/A Does the Candidate have severe psychiatric issues?

Yes  No Does the Candidate have any immediate health concerns or physical limitations?

## Placement

Level of Supervision Recommended:

**Low** - Candidate can live in independent housing and is not at risk of relapse; Candidate would benefit from daily or weekly check-ins with staff

**Moderate** - Candidate would benefit from supervision within the housing situation; Candidate can handle off-campus privileges; phone/computer access would not pose a threat to this Candidate

**High** - Candidate would do best under 24/7/365 supervision with restricted outside communications

Duration of Placement needed:

up to 30 days  up to 3 months  up to 1 year  up to 2 years  2 years or more  undetermined

Yes  No Does the Candidate need a program that accepts dependent child(ren)?

Yes  No Is the Candidate willing to participate in a Christian program?

Yes  No Has this Candidate previously (or currently) been in a trafficking shelter program?

If yes, which program? \_\_\_\_\_

What else is pertinent to the placement of this Candidate?

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