**Connect To Your Future (CTYFuture)**

**Programme Referral Form (15 to 19 years old ) NEET, Not Known, At Risk)**

**Participant Details**

|  |  |
| --- | --- |
| Name |  |
| Date of Birth |  |
| Address |  |
| Phone Number |  |
| Alternative Phone Number |  |
| E-mail |  |
| N.I. Number | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Letters | | | | Numbers | | | | | | | | | Letter | | | | |  |  |  |  | |  |  |  |  |  |  |  |  | |  |  | |

**Referral Contact Details**

|  |  |  |
| --- | --- | --- |
| Name | |  |
| Position/Job Title | |  |
| Phone Number | |  |
| Alternative Phone Number | |  |
| E-mail | |  |
| School, College, Agency/Organisation | |  |
| **Reasons for referral**  Poor Attendance  ………………...............................................................................................  …………………………………………………………………………………………………………………………………………………  Motivation  …………………………………………………………........................................................  …………………………………………………………………………………………………………………………………………………….  Behaviour  .....................................................................................................................  …………………………………………………………………………………………………………………………………………………….  Other  .……………………………………………………………………………………………………………….  …………………………………………………………………………………………………………………………………………………….  **Young People in Education**  Has the Participant been identified through the application of the **Local Authority Risk of NEET Index?** Yes / No\* (delete as appropriate) \*If no what assessment has been used to confirm that the Participant is At Risk of NEET? | | |
| Is the Participant being supported by any other agencies, or services? Yes\* /No  \*Who? | | |
| Other information or additional support needs? (health & safety issues for key workers, violence towards staff, risk management requirements, care plan etc.) | | |
| **Is the participant in receipt of a benefit?**  – confirm which applies | **Jobseekers Allowance**  **Universal Credit** | |
| **Confirmation of Status** – confirm which applies | **At Risk of becoming NEET and/or disengaged from Education/Training?**  **Currently NEET under 20 years?** | |

I confirm that the named participant is eligible for the programme and has provided appropriate evidence to confirm their status (if aged under 16). **If NEET attach print out from database to confirm NEET status and start date.**

|  |  |
| --- | --- |
| Referral Signature |  |
| Date |  |

**Please return completed forms to:** [ctyf@positive-steps.org.uk](mailto:ctyf@positive-steps.org.uk)