

Prevention Promotion

YOUTH DEMOGRAPHICS

First Name: _____

Middle Name: _____

Last Name: _____

Date of Birth: _____

Race: _____

Gender: _____

Self-reported Race/Ethnicity: _____

NE Student ID: _____

CONTACT INFORMATION

Address: _____

City: _____

State: _____

Zip: _____

County of Residence: _____

Primary Phone #: _____

Cell Phone #: _____

Alternative Phone #: _____

Email address: _____

SCHOOL INFORMATION

*School Enrollment (pick one):

Enrolled/Attending

Suspended

Expelled

Home schooled

HS Graduate/GED, no college

College Student

Drop Out

Alternative School

Unspecified

*School name: _____

*Current Grade: _____

FAMILY INFORMATION

Family size: _____

Youth Employed: _____

Eligible for Free/Reduced Lunch (y/n): _____

Family Income (pick one):

\$0-\$9,999

\$10,000-\$24,999

\$25,000-\$39,999

\$40,000 or over

*Custody/Guardianship (pick one)

Single Parent

Both
Parents

Guardian

State
Ward/Ward of
the Tribal Court

Lives on Own

Interpreter needed?

Yes- youth

Yes- parents

Yes – youth
and parents

No

If yes, what language? _____

GRANT INFORMATION

*Grant County: _____

Grant #: _____

REFERRAL/ENROLLMENT INFORMATION

Person Referring: _____

*Referral Source: _____

*Referral Date: _____

*Enrollment Date: _____

File #: _____

*Reason for Referral:

- | | |
|---|--|
| <input type="checkbox"/> Afterschool supervision | <input type="checkbox"/> Asset building |
| <input type="checkbox"/> College planning | <input type="checkbox"/> Community engagement |
| <input type="checkbox"/> Community service | <input type="checkbox"/> Diversion requirement |
| <input type="checkbox"/> Education/tutoring | <input type="checkbox"/> Gang prevention |
| <input type="checkbox"/> High Risk behaviors | <input type="checkbox"/> Job Skills |
| <input type="checkbox"/> Law violation | <input type="checkbox"/> Leadership Development |
| <input type="checkbox"/> Life Skills | <input type="checkbox"/> Prosocial activity/sports |
| <input type="checkbox"/> Substance abuse prevention | <input type="checkbox"/> Summer supervision |

EB-NE Intake Assessment Completed

Yes

No

If no, why not?

Youth refused

Not appropriate for youth (too young, language barrier, etc.)

Youth left program early

Date complete: