

**CareSouth Youth Hostel Referral Form**

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75 Moss St Nowra NSW 2541

**AGENCY DETAILS**

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

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

Caseworker: \_\_\_\_\_ PH \_\_\_\_\_

**YOUNG PERSONS DETAILS**

Name of Young Person: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Gender: Female  Male

Phone Number: \_\_\_\_\_ Mobile: \_\_\_\_\_

Current living arrangements (with whom, for how long):

\_\_\_\_\_  
\_\_\_\_\_

Has Young Person lived at the Youth Hostel before? \_\_\_\_\_

**MEDICAL INFORMATION**

Significant medical conditions: \_\_\_\_\_

Ongoing prescribed medication: \_\_\_\_\_

**PERSONAL DETAILS**

Country of birth: \_\_\_\_\_ Preferred Language: \_\_\_\_\_

Aboriginal Torres Strait Islander: YES  No

Requires an interpreter: YES  No  Language: \_\_\_\_\_

Have any disabilities? YES  No

**BACKGROUND**

Are there any problems with Drug abuse/ Alcohol abuse/ Gambling / Inhalants:

Please comment: \_\_\_\_\_

\_\_\_\_\_  
Counsellor Name: \_\_\_\_\_ PH \_\_\_\_\_

Does the young person have any police charges? YES  NO  Next court date? \_\_\_\_\_

Charge Details: \_\_\_\_\_

Juvenile Justice worker \_\_\_\_\_ PH \_\_\_\_\_

It is sometimes necessary for CareSouth Youth Hostel to contact other services and previous accommodation providers in order to verify information. Does the Young Person give permission? YES  No

**CareSouth will contact you for an interview date and time or you can nominate the Young Person to be contacted. The Young Person will need Identification.**

**EXTRA NOTES:** Is there any information you would like to add?