Curry County Juvenile Department

94235 Moore Street, Suite 231 Gold Beach, Oregon 97444





Prevention Referral

Date:		
Name of Youth being referred:		
School:	Grade:	DOB:
Youth's Mailing Address:		
Youth's Physical Address:		
Youth Home Phone #:	Parents Work/Cell Phon	e #:
Parent/Guardian Names:		
Issues for Referral:		
Have parents been informed of refer	ral?	
Person making this referral:	Phone	e#
Have you referred this youth to any of the second of the s	ther agencies? YES NO	
Please fax to Curry County Juvenile	Department at 541-247-500	00.

Main Office: (541) 247-3302 Toll Free: (877) 739-4254 Facsimile: (541) 247-5000

PREVENTION SERVICES ENROLLMENT FORM

To be filled out by Curry County Juvenile Department Staff

At-Risk Behaviors

The following are 5 principle categories of behaviors that indicate risk for committing a first offense. The

the profile of juvenile offenders. Referral to the Prevention Program may be considered if one or more behaviors in at least two areas is checked.		
1.	Antisocial/acting out behavior	
	 □ Difficulty managing anger □ Aggressive or violent behaviors □ Lack of respect for rules □ Difficulty with honesty □ Foul language □ Fire-setting □ Sexual acting out □ Other behavior outside the norm □ Threatens to run away 	
2. School problems		
	 □ Poor attendance □ Low grades □ Incomplete assignments/Work not turned in □ Difficulties with reading, math or writing □ Lack of participation in school activities □ School behavior issues/suspensions/expulsions 	
3.	Poor family functioning	
	 □ Lack of necessities □ Family stressors, i.e. frequent moves, deaths □ Witnessing violence and abuse □ Victim of physical, emotional or sexual abuse □ Poor family communication □ Poor parental involvement or supervision □ Parental attitudes support criminality/violence 	
4.	Substance abuse	
	 □ Experimentation or use of alcohol □ Experimentation or use of illegal drugs □ Experimentation or use of tobacco □ Exposure in family setting to substance abuse 	
5.	Poor peer relationship	
	 ☐ Bullying ☐ Victim of Bullying ☐ Loner ☐ Gang or Wannabe gang affiliation 	

Possible Interventions/Referrals ☐ Drug & Alcohol Education Class ☐ Drug & Alcohol Treatment ☐ Anger Management-CCJD ☐ IEP Assistance ☐ Individual Counseling-CCH ☐ Individual Counseling-Private Provider ☐ Intensive Individual Counseling-Coastal Center ☐ Family Counseling-CCH ☐ Family Counseling-Private Provider ☐ School Counselor ☐ Child Psychologist-Diagnostic ☐ Child Psychologist-Additional ☐ CDRC Referral (severe behavior issues) □ WRAP Referral-CCH □ Doctor's Referral ☐ Health Department-CCH (reproductive health) ☐ Healthy Start □ Parenting Classes ☐ Skill Building Groups-CCJD ☐ Service Coordination-CCJD ☐ OTHER □ OTHER_____ ☐ OTHER

☐ OTHER