

-CONFIDENTIAL-

Los Alamos JJAB Resource Advocate Referral Form

Please email completed form to jjabreferral@gmail.com

Person Making Referral

Referral Date

Position/Role

Telephone

Youth Name

School

Grade

Home Phone

Cell Phone

Mailing Address

Please check preferred contact:

Mother's Name

Home Phone

Cell Phone

Mailing Address

Father's Name

Home Phone

Cell Phone

Mailing Address

Different Legal Guardian Name

Home Phone

Cell Phone

Mailing Address

Referral Reason

The Los Alamos Juvenile Justice Advisory Board (JJAB) supports many FREE youth and family programs. You will be contacted by the JJAB Youth or Family Resource Advocate in order to set up an initial meeting.

I, _____, give Los Alamos Public Schools permission to share my contact information, and reason for referral, with the Los Alamos Juvenile Justice Advisory Board Program Coordinator and/or Resource Advocate for the express purpose of referral to a Los Alamos JJAB Resource Advocate.

Signature

Form may be emailed to jjabreferral@gmail.com or mailed to PO Box 4716, White Rock, NM, 87547

