



Northern Virginia  
Family Service

## Gang Intervention Prevention Education “IPE” Program

Jurisdiction: \_\_\_\_\_

### Referral for Services

Case management services will be provided free of charge by Northern Virginia Family Service’s Intervention, Prevention and Education Program for youth at-risk for gang involvement and youth who are gang involved and their families. Please provide as much of the requested information as is possible. This helps us to provide better and faster service.

|  |  |
|--|--|
| Date of Referral   |  |
| Youth Name   |  |
| Date of Birth  |  |
| Gender   |  |
| School   |  |
| Grade  |  |
| Parent/Guardian(s) Name(s)   |  |
| Address  |  |
| Phone Number(s)  |  |
| Email Address  |  |
| Primary Language   |  |
| Preferred Language   |  |
| Speaks English?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Country of Birth (if known)  |  |
| General Reason for Referral (areas or behaviors of concern). Please also complete behavior checklist on next page.                                     |  |
| Other services that are or have been provided or attempted (please include whether or not services are/were deemed successful or unsuccessful and why) |  |
| What services do you recommend that this child/family be offered?  |  |
| Referral Source Name/Relationship to Youth   |  |
| Referral Source Telephone Number and email:  |  |

**Please mark all applicable items to determine eligibility to receive services:**

- ☐ Individual displays truant behavior.
- ☐ Individual is not passing the majority of her/his classes.
- ☐ Individual has a history of school suspensions and expulsions.
- ☐ Individual was a victim of bullying and aggression.
- ☐ Individual frequently bullies others.
- ☐ Individual engages in frequent fights with peers.
- ☐ Individual does not have positive parental figures or role models.
- ☐ Individual's parents do not attend meetings with school staff.
- ☐ Parents rarely respond to contacts by school staff regarding the individual.
- ☐ Individual is exposed to family violence
- ☐ Individual is exposed to familial substance abuse.
- ☐ Individual is exposed to long-term family conflict.
- ☐ Individual was reunified with family after an immigration related separation.
- ☐ Individual has a traumatic immigration experience.
- ☐ Family has limited resources (e.g., housing, food, finances).
- ☐ Individual has a history of running away from home.
- ☐ Individual displays aggressive behavior toward others.
- ☐ Individual is frequently defiant and non-compliant.
- ☐ Individual is currently an active gang member. If so, describe in detail below.
- ☐ Individual is not a gang member, but has a family member who is.
- ☐ Individual is not a gang member, but frequently affiliates with gangs.
- ☐ Individual is considering joining a gang.
- ☐ Individual is currently using alcohol and/or drugs.
- ☐ Individual has a history of substance abuse.
- ☐ Individual is exposed to the presence of gangs in his/her neighborhoods.
- ☐ Individual has a history of arrests and probation.
- ☐ Individual is currently on probation.

Female specific:

- ☐ Individual has a history of running away from home.
- ☐ Individual has/had a romantic partner that is gang involved.
- ☐ Individual has/had a romantic partner that is age inappropriately older.
- ☐ Individual has a history of self harm and/or suicidal ideation.
- ☐ Individual was a victim of sexual abuse/sexual assault.
- ☐ Individual has indications of exploitation.
- ☐ Concerns regarding trafficking.

- ☐ Other: Please describe \_\_\_\_\_

**\* Please return referral form to Liliana Janssen-Checa, Youth Initiatives Program Supervisor at [ljanssencheca@nvfs.org](mailto:ljanssencheca@nvfs.org) or by fax (703) 385-5176.**

Please note – once a case is accepted (based on resource availability, waiting lists, etc.), free gang prevention or intervention services will be provided by a trained professional through Northern Virginia Family Service for three to six months. You will be contacted by the IPE worker. If this case cannot be serviced or is not accepted, Liliana Janssen-Checa is available to find alternative resources to help.

It is our intention to provide the most helpful service possible for young people and families. Should you have any comments or questions about the quality of services, please contact the Youth Initiatives Program Supervisor directly at (571) 748-2549 or [ljanssencheca@nvfs.org](mailto:ljanssencheca@nvfs.org).

**Optional: To be completed for gang involved youth – Only complete if known by referral source – Please do not ask youth**

Name of gang/crew \_\_\_\_\_ Clique \_\_\_\_\_

Age youth joined \_\_\_\_\_ How joined \_\_\_\_\_

Reason for joining:

- ☐ For fun
- ☐ For protection
- ☐ A friend was in the gang
- ☐ A brother or sister was in the gang
- ☐ I was forced to join
- ☐ To get respect
- ☐ For money
- ☐ To fit in better
- ☐ Other \_\_\_\_\_

Parent/Guardian's knowledge of gang/crew membership \_\_\_\_\_

Family members in gang/crew \_\_\_\_\_

Markings or tattoos \_\_\_\_\_

Rival gangs/cliques/crews \_\_\_\_\_

Level of involvement

- ☐ Leader
- ☐ Core member/influential (with gang all of the time)
- ☐ Regular member (involved most of the time)
- ☐ Peripheral member (minimally hangs out)
- ☐ Wannabe
- ☐ Veteran/Heavy/Old Gangster/Senior Gang Member
- ☐ Do Not Know
- ☐ No Response

Role in the gang/crew \_\_\_\_\_

Crimes committed while in the gang \_\_\_\_\_

Convicted of any crimes gang related \_\_\_\_\_

Interest in remaining in or getting out \_\_\_\_\_

Additional Comments \_\_\_\_\_