



**WiSE CSE Group Work Referral Form**

**SCHOOL:**

**REFERRERS DETAILS:**

**YP NAME:**

**DOB:**

**FORM GROUP:**

**GENDER:**

**PRONOUNS:**

**ETHNICITY:**

**VULNERABILITIES**

History of Abuse (Neglect, Emotional, Physical or Sexual)	
Living in residential care or transient accommodation	
Lacking friends from the same age group or isolated from peers	
Lack of positive relationships with nurturing adults/ Breakdown of family relationships	
Has friends who have been identified as being at risk of CSE	
Not engaging in education, training or employment (including poor attendance)	
Unsure or unable to disclose their sexuality or gender identity	
Learning difficulties	
Lower than average maturity levels	
Young carer	
Recent bereavement or loss	
Low self-esteem or confidence	
History of being absent/going missing	
Family experience significant financial difficulties	
Living in a chaotic or dysfunctional household, including family history of: substance misuse; mental health difficulties; domestic abuse.	
Unaccompanied asylum seeker/refugee/migrant	

Please email referral to: **wise.surrey@ymcadlg.org**



If you have ticked any boxes on the previous page, please give further details:

**TOPICS RELEVANT TO YOUNG PERSON**

**Please tick**

Consent

Online Safety

Healthy Relationships

Sexual Health

Body Confidence

Self Esteem

Grooming

Emotions

Other

✓

Harmful Sexual Behaviour

CSE

Positive Role Models

LGBTQU+

Identity

Pornography

Sharing of Sexual Images

✓

**Please list some positive attributes, skills or strengths for this young person**

**Parent/Carer Consented**

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