Via - BeWize occasionally takes referrals for one-off awareness raising sessions for young people in need of extra support in terms of sex and relationships.

**Via - Bewize Young Person Referral Form**

**Young Person Details:**

|  |  |
| --- | --- |
| Name: |  |
| Date of Birth: |  |
| Gender: |  |
| Address: |  |

**Referral Details:**

|  |  |
| --- | --- |
| Referred by:  |  |
| Have they consented to the referral? | Yes/No |
| Main reason for referral: |  |
| Desired outcome – what do you wish the young person to gain from this 1-1 |  |
| Partner agencies involved: | Yes/No |
| Details of partner agencies *(including contact details where appropriate)*: |  |