



For Hands Office Use:	
Y/N	Schedule intake
<input type="checkbox"/>	Consultation
<input type="checkbox"/>	Court Support
<input type="checkbox"/>	_____ Diversion
<input type="checkbox"/>	Bail Release Planning

Youth Mental Health Court Worker Program Referral Form

Program Eligibility:

- Referrals can come from the youth, their family/ friends, community supports or court staff for the 'Consultation' & 'Court Support' services. Referrals can come from crown attorneys, defense attorneys, judges, or police for 'Diversion' or 'Bail Release Planning' services.
- Youth must live in the Muskoka or Parry Sound District.
- Youth between the ages of 12-17 who have been given warnings by police, or are at the pre-charge or post-charge stage, under the YCJA for diversion.
- Youth may be showing symptoms of a mental health concern or have a formal diagnosis/a developmental disability.

Program Service: Consultation Court Support Diversion Bail Release Planning

Name of Youth:

Gender Identity:

Date of Birth:

Home Phone:

Cell Phone:

Address:

Name of Parent/Guardian:

Can we contact the youth at home? Please circle: YES NO

If we cannot contact at home please provide an alternate phone number where youth can be contacted as well as the reason youth cannot be contacted at home:

Alternate phone:

Address:

Reason youth cannot be contacted at home:

Name of person the youth is living with if not residing with parent/guardian:

Details of criminal charge/ police interaction:

Details of mental health symptoms or diagnosis:

Referral Source:

Phone:

Return Court Date:

Date of Referral:

Please fax referral to:

Stephanie Snyder, Youth Mental Health Court Worker.

Office: 705-746-4293 Ext. 3211 or 1-800-668-8555 Ext. 3211 ● Fax: 705-645-7988 ● Email: youthjustice@handsthfn.ca