



**Fei Yue Community Services (Youth GO!)  
Hotspot Referral Form**

Thank you for referring the following referral(s) to Youth GO!

To help us better locate the referral(s), please provide us with the following information (based on your observations from the past 30 days) to the best of your ability.

**A. General Information**

Location of Hangout:			
Frequency of Hangout:	<input type="checkbox"/> Not Frequent (Less than once a week) <input type="checkbox"/> Somewhat Frequent (2-4 times a week) <input type="checkbox"/> Very frequent (almost everyday)		
Day of Hangout:	<input type="checkbox"/> Monday <input type="checkbox"/> Thursday	<input type="checkbox"/> Tuesday <input type="checkbox"/> Friday	<input type="checkbox"/> Wednesday <input type="checkbox"/> Weekends
Time of Hangout:	<input type="checkbox"/> 3pm – 6pm <input type="checkbox"/> 10pm – 12am	<input type="checkbox"/> 6pm – 8pm <input type="checkbox"/> Others: _____ <small>(Please state)</small>	<input type="checkbox"/> 8pm – 10pm

**B. Hotspot information**

Race:	<input type="checkbox"/> Chinese <input type="checkbox"/> Malay <input type="checkbox"/> Indian <input type="checkbox"/> Others: _____ <small>(Please state)</small>
Age Group:	<input type="checkbox"/> ≤12 <input type="checkbox"/> 13 – 14 <input type="checkbox"/> 15 – 17 <input type="checkbox"/> ≥ 18
Number of youths:	_____ Female    _____ Male
Youth activity at hotspot:	
Reason for referral:	
Referee's last encounter with the youth(s):	

**C. Individual Youth Information (if applicable)**

1. What are your concerns for the referral(s):

2. Profile of referral(s):

No.	Name	Age	Sex	School	Remarks
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					

**D. Any other information:**

**E. Referral's particulars:**

Name/ Designation:	
Organisation/ School:	
Date of Referral:	
Contact No.:	
Email Address:	

For Official Use Only		
Type of Referral:	<input type="checkbox"/> Hotspot referral <input type="checkbox"/> Individual Referral	Send Acknowledgement <input type="checkbox"/>
Name of Receiving staff:		
Worker / Subteam to follow up:		
Status of Follow up (1 month):		