CONFIDENTIAL REFERENCE

This is a confidential reference form for the purpose of determining and evaluating placement of students at New Hope House. It is to be filled out by a close friend, teacher, counselor, or church leader. The form, upon completion, is to be sent directly to New Hope House, P.O. Box 1099, Tooele, UT 84074, or preferably by fax: 435-843-5603 by the person completing it. *Do not return this form to the student or parents.* All information is confidential and is to be used only for the purpose of our intake study program. Your immediate attention is appreciated. Thank you.

Student's Name _____

What is your relationship to the student? _____

How long have you known her? _____

How long have you known the family? _____

In your opinion, what are the problem areas that you have observed or been involved in, relating to the student or the family?

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Signature _____ Date _____

Address _____ City _____

State _____ Zip _____ Phone _____