

Freedom from Trafficking Referral Form (Minors)

Victim Name(s):	
Gender:	
Age:	
Location of Victim:	
Contact Information of Guardian/Sponsor:	Name: Relationship to minor: Phone Number: Language spoken:
Contact Information of Minor:	
Country of Origin:	
Language:	
Notes:	
Immigration Status of Victim: Pre-certified; applying for T visa; Post-law enforcement cert; Has T status: Eligibility Letter	
Type of Trafficking: <i>agriculture, construction, domestic servitude, drug smuggling, factory, hospitality, nail salon, sheep herding, welding, debt bondage, forced labor, and/or sex trafficking</i>	
Trafficking took place in US? <i>What city/state?</i>	
Victim is/is not still in trafficking situation?	
Crime has/has not yet been reported to law enforcement?	
Legal Representation: <i>(legal representation with NIJC/MFS/Legal Aid Chicago? Pro bono attorney?)</i>	
Any urgent needs?	
Safety concerns?	
Client's articulated specific goals:	
Attachments	
Who is referring? Name and contact information:	

Email completed form to Summar Ghias, Managing Director, Freedom From Trafficking, Heartland Alliance Human Care Services, sghias@heartlandalliance.org, with signed release form from client. If you have any questions, please contact Summar Ghias at 312-662-6185.