



anti-trafficking project

Referral Form

Statement of Confidentially

All information you share with the at:project will be held in confidence. Only when Releases of Information have been signed will information be shared. Oregon law has the following exceptions to keeping confidentiality:

- If there is reason to believe that you may harm yourself or someone else.
- If there is reason to believe that abuse and/or neglect of a child or elderly has occurred.
- If there is reason to believe you intend to commit a crime or harmful act.
- If there is a subpoena to testify in court or case management records are court ordered.

Your participation in the at:projects program is voluntary. You have the right to withdraw at any time. You have the right to be treated fairly regardless of race, religion, ethnically, gender sexual orientation, gender identity, disability, or nationality You have the right to a grievance process if you feel you have been treated unfairly, please take the steps listed on the at Projects grievance policy/process.

If you would like to be contacted by an advocate please fill out the following form:

Please note that our advocates typically work 9am – 5pm Monday through Friday. An advocate will typically respond to referrals within 48 hours. If you submit a referral over the weekend an advocate will get back to you within 48 hours of the next business day.

Name (optional) or Referring Agency

How would you like us to contact you?

Phone

Email

Phone Number

Can we leave a message?

Yes

No

If we get to voicemail, hang up and call back later?

Yes

No

Email

*Enter email only if it is safe to use this method of communication. If you are concerned an abusive person may monitor your email, please enter a safe phone number for us to call you and do not share your email.



What is the best time of day to have an advocate contact you?

*Note our advocates typically work 9am – 5pm Monday through Friday

How can we provide assistance?

*Please provide a brief description of why you are seeking services and what assistance you are in need of.

Please email completed form to atreferral@jbarj.org