Human Trafficking Victim Assessment

Personal Information

Full Name	
Date of Birth	
Gender	4
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Contact Information	
Interpreter Needed?	
Assessment Details	
Location of Assessment	
Date of Assessment	
Name of Assessor	
Indicators of Trafficking	
Physical/Emotional State	
Signs of Control/Coercion	
Labour/Work Situation	

Control of Movement or Identification

Other Indicators	
Immediate Needs	
Safety Concerns	
Support/Services Required	
Additional Notes	
Notes	