

**LOWER SIOUX TRIBAL COURT
SEX TRAFFICKING INQUIRIES**

Age:	Address:		City
State:	Zip code:	Home telephone:	Cell:
Family Unit:			
Name of physician:			
Close friends:			
Romantic interests:			
Adult friends:			
Domestic violence in home or violence in non-family relationships:			
Curfew:			
Out-of-home sleepovers:			
Name of school:			
Attendance record:			
Frequency of travel away from Reservation:			
Driver's license:			
Friends with driver's license:			
Car ownership:			

Awareness of gang presence:
Contact with gang members:
Internet use and telephone use: Text History Facebook Snapchat Other:
Whom debts are owed to:
Threats to family:
Anyone forcing him/her to do what he/she doesn't want to do:
Free to leave or come and go as he/she wishes:
Work excessively long or unusual hours:
Fearful, anxious, depressed, submissive, tense or nervous/paranoid:
Fearful or anxious after bringing up law enforcement:
Shows signs of physical and/or sexual abuse, physical restraint, confinement or torture:
Few or no personal possessions:
Not in control of his/her own money:
Not in control of his/her own identification documents:
Inability to clarify where he/she is staying/address:

Client can be a victim. Do not confuse fear, defensiveness, apparent cooperation with or seeming protection of a perpetrator as a volitional act. Approach person with the understanding that no one is required to live in fear. Consult trauma counselors. Find out who are trusted adults.