



GROUP REFERRAL FORM

New Beginnings Counseling & Consulting Services
P.O. Box 3851
Anderson, SC 29622
Phone: 864-392-4966 |
Email: newbeginningsccs@gmail.com

New Beginnings Batterers' Intervention Program (NBBIP)

OR

LOTUS (Loving Ourselves Through Unhealthy Situations) Group

REFERRING AGENCY: _____

Case Worker Name and Extension# _____

Supervisor Name and Extension# _____

Person Being Referred: _____

Current Address: _____

Email & Phone Number: _____

Program Required: NBBIP 26 -Weeks - Domestic Violence Group
 LOTUS 16 Weeks - Anger Management Group
 Intake/Assessment Only

Current and Past Violence History () _____

Please Attach Background Check (If Applicable).
() Staffed with Program Administrator of NBBIP/LOTUS