

## MS1 - Notification of Potential Victim of Modern Slavery Form

**THIS IS NOT A REFERRAL TO THE NATIONAL REFERRAL MECHANISM (NRM)  
– PLEASE VISIT <https://www.gov.uk/government/publications/human-trafficking-victims-referral-and-assessment-forms> FOR THE CORRECT FORMS TO REFER  
AN INDIVIDUAL FOR ASSESSMENT AND SUPPORT.**

This form should be completed to notify the Home Office if you have encountered a potential victim of modern slavery but they do not want to be referred into the NRM (to receive support and a decision about their case). This form allows the potential victim to remain anonymous (unless they consent to being identified in Part C).

The police, local authorities, the National Crime Agency and the Gangmasters Licensing Authority have a duty to notify the Home Office under the Modern Slavery Act 2015. Information marked with an asterisk (\*) must be provided. Other organisations can complete this form on a voluntary basis.

This form should not be relied upon to safeguard an individual at risk. Existing safeguarding processes should still be followed in tandem with a notification.

For more information please see the accompanying guidance on gov.uk. If a referral to the NRM has already been made, this form does not need to be completed.

Completed forms should be sent to [dutytonotify@homeoffice.gsi.gov.uk](mailto:dutytonotify@homeoffice.gsi.gov.uk).

### A. Contact Details for the Person Making the Referral

Name

\*Organisation

Unit / Area

Telephone

Email

### B. Anonymous Information about the Potential Victim

**\*What is the victim's gender?**

Male

Female

Undefined / other

**\*What is the victim's nationality?**

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**\*Was the victim under 18 when the slavery or human trafficking first occurred?**

- 18 or over                       Under 18                       Don't know

**\*Do you think the person is a victim of slavery or human trafficking? (*tick all that apply*)**

- Slavery, Servitude and Forced or Compulsory Labour  
 Human Trafficking

**\*In which country or territory do you think the slavery or human trafficking occurred?**

**If in the UK, which police force area do you think the offence occurred in?**

**\*Which police force area was the victim identified in?**

**\*Have you referred this case to the police? (*If you represent the police tick yes*)**

- Yes                       No

**\*If yes, which police force did you refer it to? (*this should be the same as the force area where the offence occurred, if known*)**

**\*If not referred to the police, why not?**

**Do you think that the slavery or human trafficking (*tick all that apply*):**

- \*occurred wholly or partly within residential premises (i.e. involved domestic servitude)  
 \*involved slavery, servitude and forced or compulsory labour  
 \*involved sexual exploitation  
 \*involved the removal of organs or human tissue  
 \*involved the commission of an offence by the victim  
 unknown  
 other (*please state*)

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### C. Additional Information about the Potential Victim

You should only complete this part if you have the consent of the potential victim to do so. If they are under 18 you do not need their consent. **Where the potential victim is an adult and does not consent, ALL of Part C should be left blank.**

**Is the potential victim a minor?**

Yes

No

*I have explained the Duty to Notify to the potential victim and explained that all of the information on this form will be submitted to the Home Office, the National Crime Agency and the police to assist in the detection and prevention of modern slavery offences. I confirm that on this basis, the potential victim has consented to provide the information in Part C and to being identified on this form.*

**Signature:**

Is the potential victim also willing to be contacted by the police?

Yes

No

Potential Victim's First Name

Potential Victim's Surname

Potential Victim's Alias

Potential Victim's Date of Birth

*A safe phone number and address for communications should ONLY be provided if the potential victim is willing to engage with the police.*

Safe Phone Number

Safe Address for Communications (can be via legal representative)

**The names of persons who may have perpetrated the suspected slavery or human trafficking of the victim (if you do not know, leave blank)**

**The names of persons who may also have been victims of slavery or human trafficking by the same perpetrators (if you do not know, leave blank)**

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### **D. Other Additional Information**

**Other Relevant Information (free text) – N.B. This should not allow the potential victim to be identified, unless they agreed to be identified in Part C.**