|  |  |  |
| --- | --- | --- |
| **Referral Source** | | |
| Referral Date: | | |
| Placement Agency: | | Worker: |
| Phone Number: |  | |
| Phone Number: |  | |
| Email: | | |
| Placing Authority (please attach documentation of authority): | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Demographic Information** | | | |
| Referral Name | | Nickname(s) | |
| Age: | DOB: | | Gender: |
| Last Known Address: | | | |
| City: | State: | | Zip: |
| Permanent Address (if different): | | | |
| City: | State: | | Zip: |
| Home Phone: | Cell Phone: | |  |
| Race: | Ethnicity: | | Tribal Affiliation: |
| Language Spoken: | | Language Written: | |
| Spiritual/Religious Affiliation | | | |

|  |  |
| --- | --- |
| **Mental Health** | |
| Diagnosis (if available) | Date of Most Recent Evaluation: |
| Psychiatrist: | Psychologist/Therapist: |
| Other Providers: | |
| Current Medications: | |

|  |
| --- |
| **Chemical Health** |
| History of substance abuse (y/n): |

|  |  |
| --- | --- |
| **Placement History** | |
| Previous placement(s) | Reason for termination |
|  |  |
|  |  |
|  |  |

|  |
| --- |
| **Justice System Involvement** |
| Current Charges: |
| Offense History: |

|  |  |
| --- | --- |
| **Goals of Placement (please send out of home placement plan)** | |
|  | |
|  | |
|  | |
| **Youth’s Strengths** | **Areas of Need** |
|  |  |
|  |  |
|  |  |
|  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Parent/Guardian/Advocate #1 Information** | | | |
| Name: | | Nickname(s) | |
| Age: | DOB: | | Gender: |
| Address: | | | |
| City: | State: | | Zip: |
| Home Phone: | Cell Phone: | |  |
| Race: | Ethnicity: | | Tribal Affiliation: |
| Language Spoken: | | Language Written: | |
| Spiritual/Religious Affiliation | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Parent/Guardian/Advocate #2 Information** | | | |
| Name: | | Nickname(s) | |
| Age: | DOB: | | Gender: |
| Address: | | | |
| City: | State: | | Zip: |
| Home Phone: | Cell Phone: | |  |
| Race: | Ethnicity: | | Tribal Affiliation: |
| Language Spoken: | | Language Written: | |
| Spiritual/Religious Affiliation | | | |

|  |
| --- |
| Other Comments: |