

Parent(s)/Guardian(s) Name	Relationship	Phone Number	Email Address

Street Address	City	Zip Code

The children listed below are being referred as (check one):

- Receiving Child Protective Services. Childcare and development services are a necessary component of the child protective service plan.
- At-Risk of abuse, neglect and/or exploitation. Childcare and development services are needed to reduce or eliminate that risk.

(List all children/siblings in the home under the age of 18, even if childcare is not needed.)

Child's First Name	Child's Last Name	Date of Birth (MM/DD/YYYY)	Gender (M/F)	Days/Hours Needed - include travel time (only indicate for the children who need childcare)
				Days: (Example: M-F) Hours: (Example: 8:00am-5:00pm)
				Days: (Example: M-F) Hours: (Example: 8:00am-5:00pm)
				Days: (Example: M-F) Hours: (Example: 8:00am-5:00pm)
				Days: (Example: M-F) Hours: (Example: 8:00am-5:00pm)

The probable duration of the child protective services plan or at-risk situation:

Start Date: _____ End Date: _____

- It is necessary to exempt the family from paying a family fee.

REFERRING PROFESSIONAL CONTACT INFORMATION			
Name (please print first and last name):		Title/ Agency (License Number if applicable):	
Phone Number:	Email:	County:	
Street Address:		City:	Zip Code:
Signature:			Date:

Return by Fax to (888) 293-1613 or by Email to Vanessa Sepulveda at vsepulveda@placercoe.org.