

25<sup>th</sup> JUDICIAL DISTRICT COURT, PLAQUEMINES PARISH

DEPT. OF YOUTH & FAMILY SERVICES \* FAMILIES IN NEED OF SERVICES (FINS) OFFICE

REFERRAL/SCREENING FORM

Hand Deliver/Mail To: P.O. Box 7126, Belle Chasse, LA. 70037

Fax. To: 504 297-5217, Telephone: 504 393-5765

Date \_\_\_\_\_ School/Grade: \_\_\_\_\_

State of Louisiana in the interest of:

CHILD'S NAME: \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_ Ethnicity \_\_\_\_\_ SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Current Interventions: 504 \_\_\_\_\_ Special Education \_\_\_\_\_ IEP \_\_\_\_\_ FBA \_\_\_\_\_ IBP \_\_\_\_\_ Tier Intervention Level \_\_\_\_\_

Mental Health Diagnosis \_\_\_\_\_ Medications \_\_\_\_\_

Biological Mother or

LEGAL GUARDIAN: \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_ SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Last First Middle

Address: \_\_\_\_\_ Phone: Home \_\_\_\_\_

Employer: \_\_\_\_\_ Cell/Work \_\_\_\_\_

Biological Father or

LEGAL GUARDIAN: \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_ SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Last First Middle

Address: \_\_\_\_\_ Phone: Home \_\_\_\_\_

Employer: \_\_\_\_\_ Cell/Work \_\_\_\_\_

Parents' Marital Status: \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_ Never Married

Others In The Home:

Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_\_ Gender \_\_\_\_\_ Social Security No. \_\_\_\_\_

Louisiana Children's Code Art. 730. Grounds

Allegations that a family is in need of services must assert one or more of the following grounds:

\_\_\_\_\_ (1) That a child is truant or has willfully and repeatedly violated lawful school rules. Frequency of Absences: \_\_\_\_\_

Explain: \_\_\_\_\_

\_\_\_\_\_ (2) That a child is ungovernable.

Explain: \_\_\_\_\_

\_\_\_\_\_ (3) That a child is a runaway. Frequency: \_\_\_\_\_

\_\_\_\_\_ (4) That a child has repeatedly possessed or consumed intoxicating beverages, or that he has misrepresented or deceived his age for the purpose of purchasing or receiving such beverages from any person, or has repeatedly loitered around any place where such beverages are the principal commodities sold or handled. Explain: \_\_\_\_\_

\_\_\_\_\_ (5) That a child has committed an offense applicable only to children; such as, gambling, purchase or use of alcohol, cigarettes, etc. Explain: \_\_\_\_\_

\_\_\_\_\_ (6) That a child under ten years of age has committed any act which if committed by an adult would be a crime under any federal, state, or local law. Specify Crime: \_\_\_\_\_

\_\_\_\_\_ (7) That a caretaker has caused, encouraged, or contributed to the child's behaviors enumerated in this Article or to the commission of delinquent acts as defined in Title VIII.

Explain: \_\_\_\_\_

\_\_\_\_\_ (8) That, after notice, a caretaker has willfully failed to attend a meeting with the child's teacher, school principal, or other appropriate school employee to discuss the child's truancy, the child's repeated violation of school rules, or other serious educational problems of the child. Explain: \_\_\_\_\_

\_\_\_\_\_ (9) That a child has been found incompetent to proceed with a delinquency matter under Article 832 et seq.

\_\_\_\_\_ (10) That a child is found in possession of a handgun or semiautomatic handgun under circumstances that reasonably tend to exclude any lawful purpose. Explain: \_\_\_\_\_

\_\_\_\_\_ (11) Child found to be engaged in Cyber Bullying

Written Basis For

Complaint/Referral: \_\_\_\_\_

Other Child-Serving Agencies - involved with Child and/or

Family: \_\_\_\_\_

Certification:

I certify that the allegations above are true and correct upon my information and belief in regard to the above named child and family is a Family In Need Of Services according to Louisiana Children's Code.

Referred By (Print): \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Telephone: \_\_\_\_\_ (rev 06/20/18)