



2010 FUNDING REQUEST ENROLLMENT INFORMATION
ERIE COUNTY

Date of Referral: ____/____/____

Name of child: _____ DOB: _____ Age: _____

Name of Parent: _____

Dates of funding request: Start: _____ End: _____ (not to exceed 6 months or Cross fiscal years)

Amount of \$'s being requested: _____

Service being funded: _____

- | | | |
|--|---|--|
| <input type="checkbox"/> Non – Clinical in-home visits | <input type="checkbox"/> Non- Clinical parent support grp | <input type="checkbox"/> Parent Education |
| <input type="checkbox"/> Mentoring | <input type="checkbox"/> Respite Care (including camp) | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Social/Recreational Act | <input type="checkbox"/> Safety/Adaptive Equipment | <input type="checkbox"/> Structured Act to improve family function |
| <input type="checkbox"/> Parent Advocacy | <input type="checkbox"/> Service Coordination | |
| <input type="checkbox"/> Other | | |

Name of Provider: _____ Name of contact Person: _____

Address of Provider: _____

Phone No. of Provider: _____

Service Coordinator/Facilitator: _____

Reason for Referral:

- | | |
|--|--|
| <input type="checkbox"/> Basic need of youth/family (food, shelter, clothing, utilities) | <input type="checkbox"/> Behavioral |
| <input type="checkbox"/> Court/legal concerns | <input type="checkbox"/> Delinquent |
| <input type="checkbox"/> Need related to Developmental Disability | <input type="checkbox"/> Unruly |
| <input type="checkbox"/> Educational Concerns | <input type="checkbox"/> Parent education |
| <input type="checkbox"/> Physical health concerns | <input type="checkbox"/> Social concerns |
| <input type="checkbox"/> Risk of out of home placement | <input type="checkbox"/> Substance use/abuse or concerns |
| <input type="checkbox"/> Poses a safety risk to self or others | <input type="checkbox"/> Help Me Grow |
| <input type="checkbox"/> Youth/family strengthening/asset building | <input type="checkbox"/> Emotional/Mental Health |
| <input type="checkbox"/> Poverty | |

Child Abuse Yes No

Neglect issues with the family Yes No

Explanation:

Funding Source:

- FCSS (FCFC) Trust Fund Reclaim Other