







Placement information				
Caregiver name:	Caregiver name:			
DOB: Age:	DOB: Age:			
Race:	Race:			
Phone:	Phone:			
Email:	Email:			
Address:	County:			
Caregiver gender:	Caregiver gender:			
Caregiver sexual orientation:	Caregiver sexual orientation:			
Special caregiver classification:				
O Deaf/hearing impairment O Blind/visual i	mpairment O Homelessness O Nonverbal			
◯ Immigrant/refugee/asylum seeker ◯ LGB'	TQ+ O Veteran O Cognitive/physical/mental disability			
O Limited English proficiency Other				
Total number of youth in home:	Number of relative children in the home:			
Number of kinship children in the home:	Number of foster children in the home:			
Number of adoptive children in the home:	Number of biological children in the home:			
Annual household income:	Total number of individuals in home:			
Language spoken in the home:				
Child's full name:	DOB: Age:			
Gender: O Female O Male O Otho	er Placement type:			
Placement reason:				
Race: O Black/African American O White/Caucasian OHispanic/Latino				
Nace. O Diack/Afficall Afficiall O W	/hite/Caucasian OHispanic/Latino			
O Pacific Islander O Native Amer	<u> </u>			
	ican OMultiracial OAsian OOther			
O Pacific Islander O Native Amer	ican OMultiracial OAsian OOther re: Caseworker / agency:			
O Pacific Islander O Native Amer County: Date child entered ca Clothing sizes: O Infant O Toddler O You	ican OMultiracial OAsian Other .re: Caseworker / agency: th OAdult Tops: Bottoms:			
O Pacific Islander O Native Amer County: Date child entered ca	ican OMultiracial OAsian Other re: Caseworker / agency: th O Adult Tops: Bottoms: ONB O1 O2 O3 O4 O5 O6			
O Pacific Islander O Native Amer County: Date child entered ca Clothing sizes: O Infant O Toddler O You Shoe size: Diaper size: O Pre Pull ups size: O 2T/3T O 3T/4T O 4T	ican OMultiracial OAsian Other cre: Caseworker / agency: th OAdult Tops: Bottoms: ONB O1 O2 O3 O4 O5 O6			
O Pacific Islander O Native Amer County: Date child entered ca Clothing sizes: O Infant O Toddler O You Shoe size: Diaper size: O Pre Pull ups size: O 2T/3T O 3T/4T O 4T	ican OMultiracial OAsian Other cre: Caseworker / agency: th OAdult Tops: Bottoms: ONB O1 O2 O3 O4 O5 O6 C/5T Favorite color: Grade:			
O Pacific Islander O Native Amer County: Date child entered ca Clothing sizes: O Infant O Toddler O You Shoe size: Diaper size: O Pre Pull ups size: O 2T/3T O 3T/4T O 4T School supplies: O Yes O No Car seat no	ican OMultiracial OAsian Other cre: Caseworker / agency: th OAdult Tops: Bottoms: ONB O1 O2 O3 O4 O5 O6 C/5T Favorite color: Grade: Grade: eeded: OYes ONo Type of car seat:			
O Pacific Islander O Native Amer County: Date child entered ca Clothing sizes: O Infant O Toddler O You Shoe size: Diaper size: O Pre Pull ups size: O 2T/3T O 3T/4T O 4T School supplies: O Yes O No Car seat no Height: Weight: Special child classification:	ican OMultiracial OAsian Other cre: Caseworker / agency: th OAdult Tops: Bottoms: ONB O1 O2 O3 O4 O5 O6 C/5T Favorite color: Grade: Grade: ceded: OYes ONo Type of car seat: Child sexual orientation:			
O Pacific Islander O Native Amer County: Date child entered ca Clothing sizes: O Infant O Toddler O You Shoe size: Diaper size: O Pre Pull ups size: O 2T/3T O 3T/4T O 4T School supplies: O Yes O No Car seat no Height: Weight: Special child classification:	ican OMultiracial OAsian OOther re: Caseworker / agency: th OAdult Tops: Bottoms: ONB O1 O2 O3 O4 O5 O6 T/5T Favorite color: Grade: eeded: OYes ONo Type of car seat: Child sexual orientation: impairment O Homelessness O Nonverbal			

Child's full name: DOB:		Age:		
Gender: O Female O Male O Other		Placement type:		
Placement reason:				
Race: O Black/African American O White/Caucasian OHispanic/Latino O Pacific Islander O Native American OMultiracial OAsian OOther				
County: Date child entered care: Caseworker / agency:				
Clothing sizes: O Infant O Toddler O Youth O Adult Tops: Bottoms:				
Shoe size: Diaper size: OPre ONB O1	$\bigcirc 2 \bigcirc 3 \bigcirc$)4		
Pull ups size: \bigcirc 2T/3T \bigcirc 3T/4T \bigcirc 4T/5T Favorite	e color:	Grade:		
School supplies: OYes ONo Car seat needed: OYes	ONo Type of	of car seat:		
Height: Weight:	Child sexual or	ientation:		
Special child classification: O Deaf /hearing impairment O Blind /visual impairment O Homelessness O Nonverbal O Immigrant/refugee/asylum seeker O LGBTQ+ O Cognitive/physical/mental disability O Limited English proficiency O Other				
	DOB	A ~ ~ ·		
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Placement reason:		. IT		
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l l	Tops:	Bottoms:		
Clothing sizes: O Infant O Toddler O Youth O Adult				
Shoe size: Diaper size: OPre ONB O1 O2 O3 O4 O5 O6 Pull ups size: O2T/3T O3T/4T O4T/5T Favorite color: Grade: Grade:				
School supplies: OYes ONo Car seat needed: OYes ONo Type of car seat:				
Special child classification: O Deaf /hearing impairment O Blind /visual impairment O Homelessness O Nonverbal O Immigrant/refugee/asylum seeker O LGBTQ+ O Cognitive/physical/mental disability O Limited English proficiency O Other				

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Shoe size: Diaper size: OPre ONB O1	$\bigcirc 2$ $\bigcirc 3$ $\bigcirc 4$ $\bigcirc 5$ $\bigcirc 6$	5		
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Height: Weight:	Child sexual orientation:			
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Special child classification: O Deaf /hearing impairment O Blind /visual impairment O Homelessness O Nonverbal				
☐ Immigrant/refugee/asylum seeker ☐ LGBTQ+ ☐ Cognitive/physical/mental disability				
○ Limited English proficiency ○ Other				
Resources needed:				
☐ Twin bed frame ☐ Twin mattress ☐ Bunk bed ☐ Crib ☐ Crib mattress ☐ Toddler bed				
O Twin Bedding O Toddler bedding O Crib sheets O Begin Again Backpack O Dresser				
Fire extinguisher Smoke detector / carbon monoxide detector				
Car seat installed O Yes O No Technician: Vehicle make Vehicle model:				
vernere model.				
Source:	Cost:			