

Prevention Services Referral

1425 Forbes Ave., Pittsburgh PA 15219 Fax Referral: 412-665-0755 Main Office: 412-665-0600

Service Description: Assist family/non-traditional caregivers in identifying and accessing programs and services to meet the needs of the children in, while diverting involvement with the child welfare system. We provide an in-home assessment, resource coordination, concrete goods assistance (food, utilities, etc.) and 24-hour support. *We do not provide transportation only. ☐ Caregiver Support Eligibility: Non-CYF Active. Allegheny County resident. Child under age 18 in the care of an alternative guardian: grandparent, extended family, etc. ☐ Medical Wraparound (MRWS) Eligibility: Non-CYF Active. Allegheny County resident. Child under age 18 with a medical diagnosis/special needs. Referral Information: *Complete each section Referral Name Organization Direct Phone Email **Parent/Guardian Information:** Name Date of Birth Social Security # Address Phone

Relationship to Child



Child Information: Child's Name Date of Birth Gender Social Security # Agencies currently working with family/child: Contact Name Organization Phone Reason for Referral: Consent for Release of Referral Information: I agree to this referral. I understand the information recorded on this form and information obtained about me/my family may be shared with other service providers to support the provision of services to me and my family. I am aware that I may limit the information shared and may withdrawal consent at any time.

Parent/Guardian Signature

Referral Signature

Date

Date