

# Steps & Stages/Families Connect /Norwood Families Best Start Referral Form

Peterborough Family Resource Centre  
 201 Antrim St. Peterborough, ON K9H 3G5  
 705-748-9144 Fax 705-748-9177

## Referral Information:

<b>Date:</b>		<b>Referring Agency:</b>	
<b>Name:</b>		<b>Position:</b>	
<b>Contact Phone:</b>		<b>E-mail address:</b>	
<b>Name of program referring to:</b>	<input type="checkbox"/> Steps & Stages		<input type="checkbox"/> Families Connect

## Participant Information:

<b>Parent's Name:</b>			
<b>Address:</b>			
<b>Phone Number:</b>		<b>E-mail:</b>	
<b>Child's Name:</b>		<b>DOB:</b>	
<b>Siblings:</b>	<b>Name:</b>		<b>DOB:</b>
	<b>Name:</b>		<b>DOB:</b>
	<b>Name:</b>		<b>DOB:</b>

## Program Criteria:

<b>Reason for referral:</b>	
<input type="checkbox"/> Living in poverty	<input type="checkbox"/> Insecure nutrition
<input type="checkbox"/> Living in violence	<input type="checkbox"/> Insecure housing
<input type="checkbox"/> Adolescent	<input type="checkbox"/> Lone parent
<input type="checkbox"/> Smoking/substance use	<input type="checkbox"/> Lack of community support
<input type="checkbox"/> Lack of coping Skills/low self esteem	<input type="checkbox"/> Lack of family support
<input type="checkbox"/> Learning differences/special needs	<input type="checkbox"/> Other

<b>Transportation required:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Other agencies involved:</b>	<hr/> <hr/>
<b>Other concerns we should be aware of:</b>	<hr/> <hr/>
<b>Comments:</b>	<hr/> <hr/>