

REFERRAL FOR CHILD-SPECIFIC RECRUITMENT (PPAI)



EVOLVE
Adoption & Family Services

When complete, send to: MMcMillan@evolveservices.org

REFERRING WORKER INFORMATION:

Name: _____

Phone: _____

Fax: _____

Email: _____

How do you prefer to be contacted? In-person Phone Email

YOUTH INFORMATION:

Name (First, Middle & Last): _____

Pronouns: _____

Date of Birth: _____

Gender: _____

Race/Ethnicity: _____

ICWA? Yes No

Tribe Information: _____

Number of Siblings: _____

Are siblings being placed together? Yes No

Approval for sibling separation done? Yes No

If siblings are being recruited for together, please provide the sibling information (DOB, Gender and Ethnicity). (If siblings are to be recruited for separately, please complete a separate referral form). _____

CHILD'S HISTORY

TPR Date: _____

Reason for Removal: _____

CURRENT PLACEMENT INFORMATION

Name of Foster Parents or Program/Staff Contact: _____

Address: _____

Phone: _____

Email: _____

Date youth entered this placement: _____

Name of School/Staff Contact: _____

Tell us a bit more about this youth : _____

Memorandum of Agreement

This contractual agreement is made and entered into by EVOLVE Adoption & Family Services (EVOLVE) & _____ County Social Services in the matter of child specific recruitment services for _____ County foster youth. EVOLVE's approach to child specific recruitment focuses on each child's unique strengths, history, experiences & needs in order to find an appropriate adoptive family.

The purpose of this Memorandum of Agreement between EVOLVE and _____ County Social Services is to outline the parameters within which the parties will work together in the provision of child specific recruitment services for _____ County children.

The roles and responsibilities of the parties are agreed upon:

EVOLVE agrees to:

1. Utilize a child-centered approach to recruiting an adoptive family for _____ County children to include: review of the case file; meet at least monthly with the child to build a relationship with the child preparing them for adoption; complete diligent search efforts for biological family information and other previous connections; create an individual recruitment plan; complete adoption assessment to determine child's adoption needs.
2. Seek approval to use the child's photo for recruitment purposes.
3. Respond to all inquiries regarding the child from potential adoptive families and professionals
4. Work with the _____ County Social Worker to evaluate possible matching families and help with the transition plan and process for an adoptive family.
5. Follow all confidentially measures of _____ County Social Services.
6. Provide recruitment and support services from the time of case referral until placement into adoptive home.

_____ County Social Services agrees to:

1. Identify and refer foster children in need of adoption recruitment to EVOLVE.
2. Collaborate with the EVOLVE recruiter to implement recruitment plans.
3. Provide the EVOLVE recruiter access to the children's files or case records – via electronic or printed documents – and allow the recruiter to have copies of the information from the files.
4. Support contact between the EVOLVE recruiter and the children to help prepare the children for adoption.
5. Support contact between the EVOLVE recruiter and the children's support networks in order to assist in the development of healthy connections & individualized recruitment plans.
6. Allow the recruiter to use photo(s) and/or video(s) of the child(ren) for the sole purpose of recruitment only.

The undersigned have read and agree with this Memorandum of Agreement and hereby approve it as indicated by our signatures.

EVOLVE Adoption & Family Services

County Social Services* *can be signed by referring worker or supervisor*

Date

We look forward to working with you! Thank you for taking the time to complete this referral so that we can determine how to best serve you and the youth's recruitment needs. If you have any questions, please contact us using the contact information above. To most effectively serve this child(ren) we will need your assistance in obtaining the following documentation as applicable within two weeks of this referral: social/medical history, most recent psychological evaluation, relative/kinship search, school records/IEP, TPR order, out of home placement plan, CHIPS petition.