

BRIDGE PROGRAM REFERRAL FORM

Referral Source Information

Date of Referral: _____

Referred By: DHHS Office - Wayne North Central Wayne South Central Western Wayne
 Oakland County Macomb County

Other: _____

Referral Source Name: _____ Title: _____

Email Address: _____ Phone: _____

Prospective Participant (PP) Information

Name: _____ Date of Birth: _____

Address: _____ Gender: _____

Email Address: _____ Phone: _____

Race: American Indian/Alaska Native Asian Black/African American Hispanic/Latino
 Native Hawaiian/Other Pacific Islander White Other: _____

County of Foster Care Case: Wayne Oakland Macomb Other: _____

Date PP Entered Foster Care: _____ Date PP Exited Foster Care: _____

Permanency Plan at Exit from Foster Care: Reunification Adoption Guardianship Aged-Out
 Permanent Placement with a Fit and Willing Relative
 Another Planned Permanent Living Arrangement
 Other: _____

PP's Current Living Situation: _____

Is PP Enrolled in Education Program? If yes, describe below: YES NO UNKNOWN

Name of Education Program: _____

Does PP Have Children? If yes, complete information below: YES NO UNKNOWN

Name:	DOB:	Gender:	Living with PP?
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

Parent or Guardian Information (Complete if PP is Under 18)

Name: _____ Phone: _____

Address: _____

Relationship to PP: Biological Parent Adoptive Parent Guardian Relative

Other: _____

TNFC's Bridge Program participants are assigned to a Transition Navigator to assist them to achieve success across the transition life domains. Does PP prefer a male or female Transition Navigator?¹

FEMALE MALE NO PREFERENCE

Please explain why you are referring this individual to the Bridge Program:

Thank you for your referral! Please email the completed form to Nancy Colon, Office Manager, at ncolon@thenewfostercare.org. Questions? Please call (248) 884-7645.

¹ TNFC makes every effort to accommodate your preference, though may be unable to at the time of case acceptance due to current staffing and case levels.