Referral for Services

Child Sexual Behavioral Problems

PPS 2014 B

REV Jan 21

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| Attention Referral Agency: The Kansas Department for Children and Families (DCF) is providing this referral in accordance with K.S.A. 38 2290. Per K.S.A. 38-2290, upon DCF's receipt of a report of child abuse or neglect a child/youth having problematic sexual behaviors (defined in the statute), DCF shall immediately provide a referral of the child/youth to a child advocacy center or other mental health provider. Thank you for accepting this referraland our agency is aware the ability to provide services is based on your agency’s capacity. |
| Case Number: |  | Event Number: |  |
| Date of Referral: |  | DCF Office: |  |
| TO: |  | FROM: |  |
| EMAIL: |  | TELEPHONE #: |  |
| CHILD’S NAME | DATE OF BIRTH |
|  |  |
|  |  |
| LOCATION OF THE CHILD**(NOTE: please do not include information to locate the child on parent’s copy if parents are unaware of the child’s location.)** |
| PARENT/ CARE GIVER’S NAME |  |
| ADDRESS |  |
| CITY |  | ZIP CODE |  |
| TELEPHONE NUMBER |  |
| PARENT/CAREGIVER’S NAME |  |
| ADDRESS |  |
| CITY |  |  | ZIP CODE |  |
| TELEPHONE NUMBER |  |
| Distribution: An  in the box indicates persons receiving a copy of this notice. |
| File | Parents/Caregiver of child | Child Advocacy Center | Mental Health Provider |
| Contractor Providing Services (If Applicable) | Other |

Copy to FACTS