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| **King County Superior Court****Family Treatment Court**1211 East AlderSeattle, WA 98122206.477.2311**Please submit to Cathy Lehmann, Intake Coordinator** **Via fax or email-see below****Phone: 206-477-2565****FAX: 206-432-3694****Email: Cathy.Lehmann@kingcounty.gov** | Referral Date: |       |
|  | **Referred By:** |  |
|  | [ ]  Parents for Parents Program [ ]  Parent[ ]  DCYF Social Worker | [ ]  Attorney[ ]  PCAP[ ]  Other |
|  | **Name:**       |
|  | **Agency/Office:**       |
|  | **Phone:**       |
| participant Referral |
| Name: (Last, First, M.I.) |      | [ ]  M [ ]  F [ ]  Non Binary  [ ]  Transgender [ ]  Other  | DOB: |       |
| Address:  |       | **PHONE**: |       |
| Email:            |  | **Alternate contact:** |       |
| Ethnicity: (*check all that apply*) | [ ]  African American [ ]  Asian/Pacific Islander [ ]  Caucasian [ ]  Native American [ ]  Hispanic [ ]  Other |
| Disability:  | [ ]  None [ ]  Unknown [ ]  Mobility [ ]  Learning [ ]  Hearing [ ] Vision [ ]  Developmental [ ]  Speech [ ]  Mental/Psychological [ ]  Other |
| **Child’s Name** | **DOB** | **Gender** | **Race/Ethnicity***(check all that apply)* | **Initial** **Petition Date** | **Initial** **Allegations** | **Cause #** |
|       |       |       | [ ]  African American[ ]  Asian/Pacific Islander[ ]  Caucasian[ ]  Hispanic [ ]  Native American [ ]  Other |       | [ ]  a[ ]  b[ ]  c[ ]  d |       |
|       |       |       | [ ]  African American[ ]  Asian/Pacific Islander[ ]  Caucasian[ ]  Hispanic [ ]  Native American [ ]  Other |       | [ ]  a[ ]  b[ ]  c[ ]  d |       |
|       |       |       | [ ]  African American[ ]  Asian/Pacific Islander[ ]  Caucasian[ ]  Hispanic [ ]  Native American [ ]  Other |       | [ ]  a[ ]  b[ ]  c[ ]  d |       |
|      |      |      | [ ]  African American[ ]  Asian/Pacific Islander[ ]  Caucasian[ ]  Hispanic [ ]  Native American [ ]  Other |       | [ ]  a[ ]  b[ ]  c[ ]  d |       |
| **Contacts** | **Name** | **Phone** | **Email** |
| *Attorney* |       |       |       |
| *Social Worker* |       |       |       |
| *CASA* |       |       |       |
| *Other* |       |       |       |
| *Other* |       |       |       |
| Entered DB     GAIN entry date      |  | Notes      |
| Comments: 1.
2.
3.
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