



Public Health Services | Family Health Division
Adolescent Family Life Program (AFLP)

REFERRAL FORM

AFLP is a free and voluntary case management program for Orange County residents meeting the following criteria:
-Expectant and parenting adolescents under age 19 (both moms and dads), and
-Have custody of child or are co-parenting with the custodial parent.

Please complete all known information

Name of Youth: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Sex:  M  F

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Can AFLP program send correspondence to the address?  Y  N

Language Preference: \_\_\_\_\_ Best Phone # to reach youth: \_\_\_\_\_

Best Phone # to leave message: \_\_\_\_\_ Name of the person: \_\_\_\_\_ Relationship to youth: \_\_\_\_\_

Is client currently pregnant?  Y  N If yes, EDC: \_\_\_\_\_ Prenatal Care?  Y  N

Does the parent/guardian know about the pregnancy?  Y  N

If parenting, name(s) of client's child/ren: 1- \_\_\_\_\_ DOB: \_\_\_\_\_

2- \_\_\_\_\_ DOB: \_\_\_\_\_

Check all that apply:  Domestic violence  Foster child  Probation  Sexual assault  Homeless
 Physical abuse  Substance abuse  Mental health issues  Medical issues

Service(s) needed:  WIC  CalFresh  Housing  Prenatal/Health Care  School/Tutoring  Legal Services
 Child Care  Counseling  Parenting  Other: \_\_\_\_\_

Additional comments: \_\_\_\_\_

Person Making Referral: \_\_\_\_\_ Email: \_\_\_\_\_

Agency: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Send or Fax Completed Referrals to: AFLP Phone #: (714) 567-6229
1725 W. 17th St. FAX #: (714) 834-8051
Thanks for your referral Santa Ana, CA 92706 Intra-County Mail: Bldg. 50

FOR OFFICE USE ONLY

Assigned to: \_\_\_\_\_ Date: \_\_\_\_\_

Screening Score: \_\_\_\_\_ Date: \_\_\_\_\_ RS notified of disposition:  Y  N By: \_\_\_\_\_ Date: \_\_\_\_\_
(Initials)

Waitlist Date: \_\_\_\_\_ Waitlist Letter sent date: \_\_\_\_\_

Dismissed from Screening Service Date: \_\_\_\_\_  See Screening Dismissal Reason Form