

APPLICATION FOR ADMISSION

Alabama Sheriffs' Youth Ranches

Post Office Box 240009 Montgomery, AL 36124-0009

Date of Application _____

Youth's Name _____
Last First Middle

Birthdate _____ Birthplace _____
City County State

Age _____ Race _____ Nationality _____ Religion _____

Social Security No. _____ Sex ___ M ___ F Present School Grade _____

Legal Guardian _____
Name Relationship

Street Address _____ City County State Zip

Signature of Legal Guardian _____ Phone _____

Other Professionals acquainted with the youth's case who should be involved in the plan of care:

Name Street City State Phone

Name Street City State Phone

Name of Person Completing Application _____ Date _____

ACKNOWLEDGMENT OF SHERIFF I, _____ Sheriff of _____

County, Alabama hereby acknowledge application of _____ for admission to the Alabama Sheriffs' Youth Ranches.

Signature of Sheriff _____ Date _____

CURRENT FAMILY INFORMATION: This section must be filled out completely, regardless of where the child resides. If the child has stepparents, both natural and stepparent information must be included. If natural or stepparents are deceased, write in the name and last known address, then indicate "deceased" and give date of death. If there is no such person state "none". Social Security numbers must be included.

Father _____
 Address _____
 _____ Zip _____
 Phone # (H) _____ (W) _____
 Date of Birth _____
 Place of employment _____
 Address _____
 Nationality _____
 Religious Preference _____
 Highest school grade completed _____
 Marital Status _____

Mother _____
 Address _____
 _____ Zip _____
 Phone # (H) _____ (W) _____
 Date of Birth _____
 Place of employment _____
 Address _____
 Nationality _____
 Religious Preference _____
 Highest school grade completed _____
 Marital Status _____

Stepfather _____
 Address _____
 _____ Zip _____
 Phone # (H) _____ (W) _____
 Date of Birth _____
 Place of employment _____
 Address _____
 Nationality _____
 Religious Preference _____
 Highest school grade completed _____
 Marital Status _____

Stepmother _____
 Address _____
 _____ Zip _____
 Phone # (H) _____ (W) _____
 Date of Birth _____
 Place of employment _____
 Address _____
 Nationality _____
 Religious Preference _____
 Highest school grade completed _____
 Marital Status _____

BROTHERS OR SISTERS (Full, Half, or Step)

Name	Age	Date & Place of Birth	Current Address if Deceased - Date (Cause of Death)	Religion	School or Occupation

List any other relatives and/or adults you feel may be significant resources for background information or important to contact for the youth's future support, visits, employment, education or career planning (if not listed above).

Name	Relationship	Address	Age	Phone

SUPPORT INFORMATION

Is there a court order directing support payments on behalf of this child? _____ If yes, include court order.
 Does this child have health insurance? _____ If yes, name of company _____
 Name of Subscriber _____ Contract Number _____
 Does this child receive any Social Security / SSI / Veteran's benefits? _____ If yes, amount? _____
 To whom are benefits paid? _____
 Does the child receive an Adoption Subsidy? _____ If yes, amount? _____
If the child is admitted to the Ranch, the benefits are to follow the child, per federal requirements.
Name and Social Security Number of deceased person(s) _____
 Does this family receive public assistance funds? _____ If yes, amount? _____
 Caseworker's Name _____
 To what extent would the child's parents, relatives or concerned persons be willing to help support this child at the Ranch? _____
 Is the child known to Juvenile Court? _____ If yes, give details _____
 Does the child have a DHR family services social worker? _____ If yes, name? _____

SCHOOL INFORMATION

School the child is currently attending _____
 Mailing address of the school _____
 Please give name and phone number of the school official with whom we can discuss the child's school history _____

 Previous schools attended _____ From _____ To _____
 Previous schools attended _____ From _____ To _____
 Previous schools attended _____ From _____ To _____
 Has the child ever repeated a grade? _____ If yes, which grade(s)? _____
 Is the child enrolled in Special Education? _____
 If yes, level? _____ Are there learning disabilities? _____ Behavior problems? _____
 Does this child have problems in school? _____ If yes, state nature of problems _____

Extra-Curricular Activities _____

CHILD CARE FACILITY OR FOSTER HOMES IN WHICH THE YOUTH HAS RESIDED

Dates		Name of Institution	Address	Reason for Admission	Reason for Dismissal
From	To				

Has the child ever been rejected for admission to another child care facility, group home, or similar program? _____
 If so, why? _____

MEDICAL HISTORY

Describe overall health and any physical problems _____
 Allergies _____
 Vision/Hearing Problems _____
 Any major illnesses or injuries _____
 Child's Doctor _____ Child's Dentist _____
 Mental Health Provider _____ Dates _____

CURRENT/PREVIOUS MEDICATION HISTORY, IF ANY

Types	Dosage	Dates	
		From	To

- III. Any attempts which have been made to cure/curb the problem. This could be things such as having the child live with other parent, other relatives, in foster care, etc. It could also be counseling or lesser means, such as restriction, time-out, spankings, etc.
- IV. Developmental History and Early Childhood Information. Include anything significant about the child's early life - whether he/she walked, talked, etc., at a normal age; any severe knocks or bruises. Tell whether the child was a "good baby" or cried all the time. Describe early responses to parenting - whether he/she obeyed, did the opposite of what was asked, or ignored parents. Describe any significant events which have occurred in the child's life - death of parent, victim of child abuse/neglect, etc.
- V. Has child ever been in trouble with the law, on probation, etc.? If so, please explain.

VI. Personal and Family History Prior to Placement

A. Beginning with birth, who did the child live with (name and relationship)?

B. Where did the child live?

C. Manner of getting along with the caretaker(s).

D. Length of time child lived with each caretaker.

E. Reason(s) for changing caretakers.

ALABAMA SHERIFFS' YOUTH RANCHES, INC.

In order to have a more positive placement for your child, we ask that the family support the child in an ongoing manner.

Children enjoy visiting and talking with family and the Alabama Sheriffs' Youth Ranches encourages family contact. Please complete the visit restriction and permission form to indicate those persons who may or may not contact your child. Once a week we ask you to contact your child by phone and once a month we encourage the child to visit at home.

Your visits will need to be scheduled around work time, school, and church. However, if distance is a problem, this will be considered and handled on an individual basis.

From time to time, we may receive children through Juvenile Court. We will work with court representatives concerning visitation, etc. For example, if the judge has ordered NO FAMILY VISITS for a certain length of time or if the visit is supposed to be supervised by ranch staff or court staff. We will work with the court system. Otherwise, visitation will be the same.

In addition to the above visitation guide, the ranch normally has a time twice a year for your child to visit with you. This is usually two weeks in the summer and one week during the Christmas holidays.

All of these contacts will be scheduled on an individual basis. If you cannot visit or phone your child this often, your child will not be denied admission.

ALL VISITS MUST BE PREARRANGED BY PHONE OR LETTER WITH RANCH DIRECTOR OR SOCIAL WORKER.

VISIT RESTRICTION / PERMISSION

____ There are no restrictions. All visitation will be left up to a Ranch Representative's approval.

The following individuals have my permission to visit

Name	Type of visit	Time Limit
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_____	_____	_____
_____	_____	_____
_____	_____	_____

The following may have contact (letters, telephone, etc.) but no visitation.

_____	_____
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The following individuals **MAY NOT** have any contact or visitation

_____	_____
_____	_____

Parent/Guardian Date

Ranch Social Worker Date

Child Date

RELEASE OF INFORMATION

I _____ give permission for the Alabama Sheriffs' Youth Ranches to request, obtain and share information pertaining to _____.

Information can be obtained from _____

and any other resource deemed appropriate by the Alabama Sheriffs' Youth Ranches staff.

The information is to be used for the purpose of determining if placement is appropriate and to continue while the Alabama Sheriffs' Youth Ranches serves my child should he/she be placed at the Alabama Sheriffs' Youth Ranches.

Signature of Parent/Legal Guardian

Date

In addition to the application, the Alabama Sheriffs' Youth Ranches will need the following information: (It is not necessary to submit all the information at one time. Return the application once completed and a member of the Alabama Sheriffs' Youth Ranches staff will contact you and assist/guide in gathering the required information.)

- * copy of birth certificate and social security card
 - * copy of any custody/court orders pertaining to the child
 - * copy of insurance card or Medicaid card
 - * physical exam/dental exam
 - * copy of school grades and any educational testing completed on the child
 - * psychological exam, if available
- **additional information may be requested prior to placement