

Grande Prairie and Area Family Resource Network Referral Form



Services are provided in Beaverlodge, Grande Prairie, County of Grande Prairie No. 1, Hythe, Rycroft, Saddle Hills County, Sexsmith, Spirit River, Spirit River No. 133, Wembley, and Birch Hills County. All programs are confidential and free of charge.

Date:					
Serving (Please select	a location):				
☐ Grande Prairie	☐ County of G	rande Prairie	☐ Beaverlodge	☐ Hythe	☐ Rycroft
☐ Saddle Hills County	☐ Sexsmith	☐ Spirit River	☐ Spirit River No.133	☐ Wembley	☐ Birch Hills County
☐ Individual is awa	re of referral a	and has agreed	I to be contacted by a	service provi	ider
Caregiver Name:				DOB:	
Email:	Check if you consent to receive emails □				
Address:				Phone #	_
Community:	Postal Code:			Able to receive texts? ☐ Yes ☐ No	
		Please include AL	L children in household:		
Child's Name:				DOB:	
Child's Name:				DOB:	
Child's Name:				DOB:	_
Child's Name:				DOB:	
SERVICES AVAI	LABLE – PLE	ASE CHOOSE	PROGRAM THAT BI	EST SUITS T	HE SITUATION
become pregnant, a 'YMCA of Northern 7-18. Supports inc Grande Prairie Fa families with childre healthy developmer Navigation and Our FRN- Family Navig navigating systems developmental scre Native Counselling worldview, provides	are pregnant, or a Alberta- Famelude in- home with the pre-birth to the pr	r are parenting. nily Connect – Frisitation, parent n Society – Hea 6 vears of age family well-beir s supports to fan g to supports and Alberta –Naviga milies with childr nistoric trauma,	Provides support to anyone Provides support for familing advice and coaching althy Families- Provide residing in the home. Some and resiliency. Inilies with children of all services. Tracking head services. Tracking head services ator- Wâhkômiwêw Gren and youth aged 7-1 mentorship, access to Empression of the services of the servic	nilies with childing. es home visitati Support includes I ages through althy development rounded in an I	on supports to s positive parenting, advocacy, outreach, ent and completing and indigenous navigate systems and
Programs:					
			ograms – Caregiver Edu ng strategies, and strer		
☐ Other supports or	· programs cu	rrently receivii	ng - Please identify:		

To be completed IN FULL by the referral source Referral completed by (print) Agency: Date: Phone: Fax: Email: Reason for this referral (how can this family benefit from our support?) Enhance parental resilience (supported referral, advocacy, navigating systems) Develop social and cultural connections (Connection to family, community and Indigenous culture and ceremony) Build Knowledge of parenting and child development (Ages & Stages, Ages & Stages Social Emotional. Parent Education: Circle of Security, Active Parenting, Parenting Young Youth, Love and Logic etc.) Opportunities related to child and youth development Strengthening relationships within the family Access to concrete supports in times of need Home Visitation (Home visitation and or In-Home Support) Rural service support Other Referrals already made: What else do we need to know about this family that may help to determine the best supports. (Please do not leave blank): Please forward the completed referral to Grande Prairie Family Education Society: Fax: 780.830.0921 Email: hubcoordinator@gpfes.com 9607-102 Street Grande Prairie, Alberta T8V 2T8 Telephone: 780-830-0920 **CONSENT TO RELEASE CONFIDENTIAL INFORMATION** _____, hereby give my consent to the Grande Prairie and Area Family Resource Network to request and/or exchange confidential information to work cooperatively on my behalf with other agencies. The purpose of the information being shared is to use appropriate community support services and resources. This consent expires at the end of services. Consent can be removed at any time. ☐ Verbal Consent given ☐ Verbal Consent given to Referral Source ☐ Verbal Consent given via phone