



Children & Youth Involvement?  Yes If yes, please explain?  No

Are Parents of the Children Separated, or Divorced? Explain parental relationship?

Is there a current custody/visitation agreement in place that addresses the rights of the person with guardianship?

BIRTH PARENTS NAME (If different from above)	AGE	D.O.B.	ADDRESS	PHONE (If different from above)

CHILDREN	AGE	D.O.B.	GRADE/SCHOOL	OTHER INFORMATION INCLUDING COUNTY OF RESIDENCE

**CONFIDENTIALITY AGREEMENT:**

Signature \_\_\_\_\_

Have you applied for services through North Penn Legal Services:  Yes  No

If so, were you approved? \_\_\_\_\_ or denied \_\_\_\_\_ Please explain \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

**Marital Status:**

Married Couple - # of yrs. \_\_\_\_\_  Unmarried couple  Divorced  Separated  Widowed  Single

**REFERRAL SOURCE – How did you learn about Advocacy Fund 4 Grandparents Raising Grandchildren (AF4GRG)?**

- Self (prior client)  Atty/Court  Church  Help line  Employer/Union
- Schools  Friends/Relatives  M.D./Hospital  Publicity  Other
- Other Agency  New American Hero Support Group

*(For official use only)*

INTAKE PERSON: \_\_\_\_\_ DATE OF CALL \_\_\_\_\_