





Check the box for all that apply to the client's history of:

	Yes	No
Causing property damage including starting fires		
Physically threatening and/or attacking others		
Verbally threatening others		
Self injurious behaviors		
Mistreating animals		
Elopement		
Lying		
Fabrication		
Inappropriate sexual behaviors		
Stealing		
Drug use/abuse		
Alcohol use/abuse		
Seizure(s)		
Incontinence problems		
Requires attendant care		
Prior arrest or probation		
Current gang behavior, affiliation and desires		
Resentment towards parents		

If yes to any of the behavioral and self care issues, please explain in detail. Include the most recent date(s) of the occurrence(s) and the severity:

**Certification:**

I have completed this application truthfully, and to the best of my knowledge all information is accurate.

RC Service Coordinator: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature

**Submission of Regional Center Referral Form:**

**Your client's *current* IPP and CDER reports MUST be submitted with this form.**

**This referral MUST accompany the Wayfinders Admission Packet when it is received by the program's office for review.**

**Return all 3 documents (IPP/CDER/Referral Form) to your client in an envelope sealed as *directed below*.**

**Envelope Sealing Instructions**

**Once Completed, please place this referral in an envelope, seal the envelope completely, write your name across the overlap of the flap/envelope body. Finally, place a generous amount of clear tape over your signature.**