

THERAPEUTIC SUPERVISED VISITATION REFERRAL FORM

Referral Date: _____ **Service Request:** Supervised Visitation Supervised Transfer

Court: _____ **Judge/Referee:** _____ **Docket #:** _____

Referral Agency: _____ **Referral Contact:** _____ **Phone:** _____ **Email:** _____

Visiting Parent (VP): _____ **Relation to Child:** _____ **Language:** Eng. Sp.

Address: _____ **Borough:** _____

VP Phone: _____ **VP Email:** _____

Atty: _____ **Atty Phone:** _____ **Atty Email:** _____

Does Visiting Parent have low-income (required for eligibility): Yes No

Custodial Parent (CP): _____ **Relation to Child:** _____ **Language:** Eng. Sp.

Address: _____ **Borough:** _____

CP Phone: _____ **CP Email:** _____

Atty: _____ **Atty Phone:** _____ **Atty Email:** _____

Number of Children Being Referred for Visitation at The NYSPCC: _____

Name: _____ **Gender:** ___ **Age:** ___ **D.O.B.:** _____ **Name:** _____ **Gender:** ___ **Age:** ___ **D.O.B.:** _____

Name: _____ **Gender:** ___ **Age:** ___ **D.O.B.:** _____ **Name:** _____ **Gender:** ___ **Age:** ___ **D.O.B.:** _____

Name: _____ **Gender:** ___ **Age:** ___ **D.O.B.:** _____ **Name:** _____ **Gender:** ___ **Age:** ___ **D.O.B.:** _____

Atty: _____ **Atty Phone:** _____ **Atty Email:** _____

Referral Reason: Domestic Violence Physical Abuse Sexual Abuse Neglect Other: _____

Briefly describe: _____

ACS Involvement: Yes No **If yes, reason:** _____

Foster Care Involvement: Yes No **If yes, reason for removal:** _____

Caseworker Name: _____ **Phone:** _____ **Email:** _____

Supervisor Name: _____ **Phone:** _____ **Email:** _____

Visiting Parent (VP) Information:

Is the VP mandated to any of the following services: None Mental Health Substance Abuse Parent Education

Abusive Partner Intervention Anger Management Other _____

Is the VP allowed unsupervised contact by: Video Audio Text/email In-person None

Is there an Order of Protection between any parties on this case? Yes No

*Please note that a copy of the court order for supervised visitation and, if applicable, the order of protection are required.

The NYSPCC will send a confirmation email once all documentation has been reviewed and accepted.