

Child Find/Early On[®]

Referral



Birth to age 3
 Refer by phone: 1-800-EarlyOn
 (800) 327-5966
<https://www.1800earlyon.org/>



Ages 3-5
 Refer by phone: 1-888-320-8384
<http://www.buildupmi.org/>

Date: _____

Child's Information

Child's First Name: _____ Child's Last Name: _____ Birthdate: _____

Type of Birth: Single Twin Triplet Gender: Male Female

Ethnicity: American Indian/Alaska Native Asian Hispanic of any race Two or more races
 Black or African American White Native Hawaiian/Other Pacific Islander

Areas of Concern: Hearing Vision Communication Motor Skills Thinking Skills
 Feeding/Eating Social/Emotional Environment Health
 Prenatal Drug Exposure Premature Birth Other: _____

Parent/Guardian Information

Parent

Foster Parent Name: _____ Address: _____

Grandparent Home Phone: (____) _____ - _____ Apt #: _____

Adoptive Cell Phone: (____) _____ - _____ City: _____

Aunt/Uncle Work Phone: (____) _____ - _____ Ext. _____ Zip Code: _____

Legal Guardian Email: _____ County: _____

Other: (Please Specify Below) What is the best time to call? _____ School District: _____

Interpreter needed: Yes No If so, Language: _____

Referring Person (if different than Parent/Guardian Information)

Name: _____ Address: _____

Title/Agency: _____

City: _____ Zip Code: _____

Work Phone: (____) _____ - _____ Ext. _____ Does the Parent/Guardian know that this referral is being made?

Email: _____ (please check one) Yes No

Please Return to: **Rachel Denis**
Early On Program Coordinator
315 Armory Place
Sault Ste. Marie, MI 49783
 906-632-3373 ext. 5138
 FAX: 888-975-5250
rdenis@eupschools.org

For Office Use Only:

Date Received: _____

Referral Date: _____