

Appendix R: Help Me Grow Universal Resource Form



Universal Referral Form

Help Me Grow Alabama (HMG) is a **free** information and referral line connecting parents and providers to information about child development and community resources. By completing this form, you are:

- signing up to receive **free** information from HMG on child development and community resources in your area,
- signing up to receive access to a **free** developmental screening tool called the Ages and Stages Questionnaire (ASQ) for each of your children—ages 5 and under,
- authorizing the exchange of information, if permission is given below, for the child(ren) listed between HMG and the provider listed on this form.

Provider's Information	Provider Name (e.g. Agency, Center, Practice, School Name): _____ Contact Person: _____ Address: _____ City: _____ Zip Code: _____ Phone: _____ Fax: _____ Email: _____
Family's Information	Parent or Guardian Name(s): _____ Street: _____ City: _____ Zip Code: _____ Phone: _____ Email: _____ Best time to contact: <input type="checkbox"/> Between ____ & ____ <input type="checkbox"/> Anytime Best form of contact: <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Text Please contact me in: <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other (including specific dialect): _____ Child Name: _____ <input type="checkbox"/> Male <input type="checkbox"/> Female Date of Birth: _____ Premature? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, # of weeks early: _____ Concerns/Reason for Referral: _____ Existing services and/or other referrals in progress: _____ <input type="checkbox"/> Ask me about my other children when you contact me.

By signing this form, I, the parent/legal guardian, authorize the release and use of the information above. I also give permission to Help Me Grow to maintain contact with the provider listed about the developmental and resource information provided to my family, so the provider can give us further support.

Signature of the parent/legal guardian

Date

Email: referrals@smartstartalabama.org | Fax: 334-356-8230
www.helpmegrowalabama.org

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