



**Are any of the children in the care of the Ministry of Social Services?**

**How Long?** \_\_\_\_\_ **MSS Worker:** \_\_\_\_\_

**Why are services being requested?**

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**Safety Concerns?** \_\_\_\_\_

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**Other Agency Involvement**

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**Reason**

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**Is the family aware of and in favour of this referral?**

Yes     No

**Other Comments:**

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