

COUNTY/AGENCY NAME: _____

Is the approval child/NMD - specific? Yes No If yes, refer to RFA 01C



RESOURCE FAMILY APPROVAL CERTIFICATE

(County Name)

Resource Family:

In accordance with applicable provisions of the Welfare and Intuitions Codes section 16519.5 and the Resource Family Approval Written Directives, the

_____ has issued
(County Name)

this Resource Family Approval Certificate to

at

Approval Date:

Capacity:

Authorized County Representative

PLEASE KEEP ON FILE IN RESOURCE FAMILY HOME