s Name:s Name:s	Case Number: Case Number:
iver Name:	
F CALIFORNIA – HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVI
Relative or Non-Relative Ex Caregiver As	<u> </u>
All statements below must be answered "Yes" to answer, the worker should assess whether the pr services to the caregiver would enable the caregive health and safety. If the worker later reassesses supporting the No answer have changed sufficient given at that time.	ovision of reasonable assistance or additional liver to properly respond to the child's needs, the caregiver and determines that conditions
Responses to the following statements have be	een assessed by the undersigned.
The caregiver has been provided a summar capable, having sufficient physical and mental he and supervision appropriate to the specific needs [] Yes [] No	ealth, to meet these requirements for the care
Comments:	
2. The caregiver is aware of the child's immediate educational needs and is able to meet the health, [§89378/WIC 361.2] [] Yes [] No	
Comments:	
3. The caregiver understands State child abuse a e-mail, or fax any circumstances indicating the child hours after the event occurs to the approval agence [] Yes [] No	ld has been abused or neglected within 24
Comments:	
<u> </u>	

Comments:

	Case Number:
	Case Number:
regiver Name:	
Standard, which is characterized by caref consideration the age, maturity and devel	
well being of the child are used in the hon form of discipline that violates the child's p [] Yes [] No	
Comments:	
7. The caregiver understands and agrees placement agreement, health and education medical/dental treatment. [§89370][] Yes [] NoComments:	s to maintain the child's records, including the ional records, and written consent for
·	
physical or emotional health or safety of t	cidents, injuries or incidents that threaten to harm the he child within 24 hours after the event occurs by tten report within 7 calendar days to the approval
Comments.	
	ange in household composition within 24 hours, and a ss within 10 working days, by telephone, e-mail, or fax
Comments:	

's Name:	Case Number:
s Name:giver Name:	
givei Name.	
10. The caregiver agrees to report any change in the agency by telephone, e-mail, or fax 30 days prior to the available. [§89361(d)] [] Yes [] No	
Comments:	
11. The caregiver has been provided with a copy of t them, and agrees to ensure that all members of the h[] Yes [] No	
Comments:	
12. The caregiver agrees to nost emergency telephore	ne numbers in a prominent location
12. The caregiver agrees to post emergency telepholdiscuss emergency procedures with the child, and pra 6 months. [§89323(a) and (a)(1)] [] Yes [] No Comments:	actice emergency procedures every
discuss emergency procedures with the child, and pra 6 months. [§89323(a) and (a)(1)]	actice emergency procedures every
discuss emergency procedures with the child, and pra 6 months. [§89323(a) and (a)(1)] [] Yes [] No	actice emergency procedures every
discuss emergency procedures with the child, and pra 6 months. [§89323(a) and (a)(1)] [] Yes [] No	d to arrange for occasional short-term
discuss emergency procedures with the child, and pra 6 months. [§89323(a) and (a)(1)] [] Yes [] No Comments: 13. The caregiver understands that they are permitte babysitters, alternative caregivers, respite care, leavir licensed child care, and participation in extracurricular [§89378(a)(1)(A) through (F)]	d to arrange for occasional short-term ag children alone without adult supervision, enrichment, and social activities.
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discuss emergency procedures with the child, and pra 6 months. [§89323(a) and (a)(1)] [] Yes [] No Comments: 13. The caregiver understands that they are permitte babysitters, alternative caregivers, respite care, leavir licensed child care, and participation in extracurricular [§89378(a)(1)(A) through (F)] [] Yes [] No Comments: 14. The caregiver shall provide at least three nutritions snacks, meet any special dietary needs of the child, a available to all household members, and invite the chile [§89376]	d to arrange for occasional short-term of children alone without adult supervision, enrichment, and social activities.
discuss emergency procedures with the child, and pra 6 months. [§89323(a) and (a)(1)] [] Yes [] No Comments: 13. The caregiver understands that they are permitte babysitters, alternative caregivers, respite care, leavir licensed child care, and participation in extracurricular [§89378(a)(1)(A) through (F)] [] Yes [] No Comments: 14. The caregiver shall provide at least three nutrition snacks, meet any special dietary needs of the child, a available to all household members, and invite the child.	d to arrange for occasional short-term of children alone without adult supervision, enrichment, and social activities.

's Name:	Case Number:
's Name:	
giver Name:	
15. The caregiver understands and agrees that be held during bottle-feeding using an unbreakt propped for an infant. [§89376] [] Yes [] No	at an infant who is not able to hold a bottle, shall able bottle and at no time shall a bottle be
Comments:	
16. Caregivers are permitted to encourage, bu appropriate, to learn meal preparation, which mappliances [§89376][] Yes [] No	t not require, a child as age and developmentall nay include the use of kitchen knives and
Comments:	
Comments.	
	sportation to medical appointments, school, and in vehicles that are in safe operating condition,
extracurricular, enrichment, or social activities i unless other arrangements for transportation ar agreement. [§89374(a) and (c)] [] Yes [] No Comments:	n vehicles that are in safe operating condition, re stated in the written plan or placement
unless other arrangements for transportation ar agreement. [§89374(a) and (c)] [] Yes [] No	re stated in the written plan or placement that the child is permitted to have age and all hygiene products, kitchen knives and aning solutions.
unless other arrangements for transportation ar agreement. [§89374(a) and (c)] [] Yes [] No Comments: 18. The caregiver understands and will ensure developmentally appropriate access to personal appliances, medications, disinfectants, and clear [§89372(a)(2)(B)] and [§89387.2(b)(1) through [] Yes [] No	e that the child is permitted to have age and al hygiene products, kitchen knives and aning solutions. (3)]
unless other arrangements for transportation ar agreement. [§89374(a) and (c)] [] Yes [] No Comments: 18. The caregiver understands and will ensure developmentally appropriate access to personal appliances, medications, disinfectants, and clear [§89372(a)(2)(B)] and [§89387.2(b)(1) through	e that the child is permitted to have age and al hygiene products, kitchen knives and aning solutions. (3)]
unless other arrangements for transportation ar agreement. [§89374(a) and (c)] [] Yes [] No Comments: 18. The caregiver understands and will ensure developmentally appropriate access to personal appliances, medications, disinfectants, and clear [§89372(a)(2)(B)] and [§89387.2(b)(1) through [] Yes [] No	e that the child is permitted to have age and all hygiene products, kitchen knives and aning solutions. (3)]
unless other arrangements for transportation ar agreement. [§89374(a) and (c)] [] Yes [] No Comments: 18. The caregiver understands and will ensure developmentally appropriate access to persona appliances, medications, disinfectants, and cleat [§89372(a)(2)(B)] and [§89387.2(b)(1) through [] Yes [] No Comments: 19. Caregiver shall provide adequate care and	re stated in the written plan or placement e that the child is permitted to have age and all hygiene products, kitchen knives and aning solutions. (3)]
unless other arrangements for transportation ar agreement. [§89374(a) and (c)] [] Yes [] No Comments: 18. The caregiver understands and will ensure developmentally appropriate access to personal appliances, medications, disinfectants, and clear [§89372(a)(2)(B)] and [§89387.2(b)(1) through [] Yes [] No Comments: 19. Caregiver shall provide adequate care and Capacity issues do not apply to relative/NREFN home is a licensed home. [§89228]	re stated in the written plan or placement e that the child is permitted to have age and all hygiene products, kitchen knives and aning solutions. (3)] I supervision for the number of children in care. M homes [§89378], unless the relative or NREFI

Child'	S Name: Case Number: S Name: Case Number:	
Care	RELATIVE or NREFM CAREGIVER DECLARATION AND AGREEMENT	
l/We	declare that:	
1.	I/We have been provided with a summary of the state regulations regarding the approval an operation of a relative foster home and agree to abide by them (Caregiver Initial)	d
2.	I/We agree to cooperate with the county in the maintenance of caregiver standards (Caregiver Initial)	
3.	I/We have been provided with a copy of the child(ren)'s personal rights and understand then and agree to ensure that all members of the household will abide by them (Caregiv Initial)	
4.	I/We agree to provide for the special needs of any child placed in my/our care, including but not limited to:	
	To provide the services identified in the child's placement agreement and, if applicable, Transitional Independent Living Plan. [§89378(a)] (Caregiver Initial)	
	 If the child is a minor parent, to provide direct care and supervision of the child of the mir parent whenever the minor parent is at school or otherwise unavailable/unable to care fo the child. [§89378(c)(1)] (Caregiver Initial) 	
	 If the child has a disability, to make necessary specific provisions as required to protect a assist the child and maximize the child's potential for self-help. [§89387](Caregive Initial) 	
	 If the child is under age 10 or is developmentally disabled, mentally handicapped, or nee special care and supervision, any pools or open body of water will be secured as require [§89387(d)] (Caregiver Initial) 	
appr	have not and will not make any false or misleading statements associated with application for oval, including information regarding the caregiver, family members, family home, or any of the ces to be provided in the home.	
	Caregiver Signature Date	
	Caregiver Name (Print)	
	Caregiver Signature Date	

Caregiver Name (Print)

's Name:	Case Number:
's Name:	Case Number:
giver Name:	
Assessment Summary:	
The relative/non-relative extended family member has	s the ability and capacity to provide
care and supervision to meet the child(ren)'s needs.	
[] Yes [] No	

Phone Number

Signature of County CWS or Probation Worker

Date