



Strengthening Families Prince Albert

Program Application

 Teens (ages 12-16) Kids (Ages 7-12)

Date of Application:

Parent/Caregiver(s)

Name:

Date of Birth:

Address:

Phone:

Email:

Signature _____

Child or Youth

Name:

Birthdate:

of additional siblings/youth in the house?

Names/Ages:

Did someone help you fill out this form? If so, please have them fill out the detail below. Important Note for Referring Agencies: By making this referral, you are acknowledging that you have spoken to the parent/caregiver about Strengthening Families Program (SFP) and they have given informed consent for SFP staff to contact them to discuss their participation in the program.

Agency:

Email:

Name:

Phone/Fax:

Signature

Date

What do you think your family needs to improve? (Check all that apply)

- Emotional Management
- Reduce Conflict
- Communication
- Bonding & Attachment
- Connection to Service & Community
- Access to Culture

Which of the following risk factors impact your family? (Check all that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> physical violence | <input type="checkbox"/> alcohol | <input type="checkbox"/> parenting concerns |
| <input type="checkbox"/> emotional violence | <input type="checkbox"/> drugs | <input type="checkbox"/> housing |
| <input type="checkbox"/> sexual violence | <input type="checkbox"/> gambling | <input type="checkbox"/> sexual orientation |
| <input type="checkbox"/> elderly abuse | <input type="checkbox"/> mental health | <input type="checkbox"/> negative peers |
| <input type="checkbox"/> poor supervision | <input type="checkbox"/> cognitive impairment | <input type="checkbox"/> anti-social behaviour |
| <input type="checkbox"/> basic needs | <input type="checkbox"/> physical health | <input type="checkbox"/> unemployment |
| <input type="checkbox"/> missing school | <input type="checkbox"/> suicide | <input type="checkbox"/> missing/runaway |
| <input type="checkbox"/> cultural adjustment | <input type="checkbox"/> self-harm | <input type="checkbox"/> threat to public safety |
| <input type="checkbox"/> grief/loss | <input type="checkbox"/> criminal involvement | <input type="checkbox"/> gangs |
| <input type="checkbox"/> lack of transportation | <input type="checkbox"/> crime victimization | <input type="checkbox"/> family dynamics |

Additional comments/concerns:

What other agencies and services are your family connected to?

<input type="checkbox"/>	Catholic Family Services Prince Albert	<input type="checkbox"/>	Kids First
<input type="checkbox"/>	Sask Rivers Public School Division #119	<input type="checkbox"/>	Family Futures
<input type="checkbox"/>	Prince Albert Catholic School Division	<input type="checkbox"/>	Daycare/Child Care Services
<input type="checkbox"/>	Other school system:	<input type="checkbox"/>	Early Childhood Intervention Program (ECIP)
<input type="checkbox"/>	Saskatchewan Ministry of Social Services	<input type="checkbox"/>	PA Literacy Network
<input type="checkbox"/>	Saskatchewan Ministry of Justice	<input type="checkbox"/>	Learning Disabilities Association of Sk (LDAS)
<input type="checkbox"/>	Prince Albert Parkland Health Region/Sask Health Authority/Victoria Hospital	<input type="checkbox"/>	Native Coordinating Council (NCC)
<input type="checkbox"/>	RCMP	<input type="checkbox"/>	Salvation Army
<input type="checkbox"/>	Prince Albert Police Service/HUB/Victim Services	<input type="checkbox"/>	Bernice Sayese Centre
<input type="checkbox"/>	Mobile Crisis and Sexual Assault Services	<input type="checkbox"/>	Canadian Mental Health Association
<input type="checkbox"/>	ICFS/Bands/Tribal Councils	<input type="checkbox"/>	Saskatchewan Association of Community Living
<input type="checkbox"/>	Mental Health/Counselling Agency	<input type="checkbox"/>	Metis Women's Association
<input type="checkbox"/>	Doctor/Clinic	<input type="checkbox"/>	PA Multicultural Centre
<input type="checkbox"/>	Women's Safe Shelter	<input type="checkbox"/>	MACSI
<input type="checkbox"/>	YWCA	<input type="checkbox"/>	Red Cross
<input type="checkbox"/>	Housing (PAHA, Northern Spruce, etc)	<input type="checkbox"/>	Community Service Centre
<input type="checkbox"/>	PA Outreach	<input type="checkbox"/>	Jump Start/Creative Kids/Dream Brokers/KidSport
<input type="checkbox"/>	Others:	<input type="checkbox"/>	Church/Faith Organizations
		<input type="checkbox"/>	Post Secondary Institutions (U of S, U of R, FNUC, Sask Polytech)
		<input type="checkbox"/>	Children's Haven
		<input type="checkbox"/>	PAGC urban services

Please send completed forms to:
 Strengthening Families Prince Albert
 300-1008 1st Ave W
 Prince Albert SK S6V 4Y4

(306) 922-3202 office, (306) 922-7977 fax, (306) 981-6882 cell/text
strengtheningfamilies.cfspa@sasktel.net

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For Strengthening Families Prince Albert only	
Date referral received:	Client ID:
Date parent/caregiver contacted:	Number of contacts:
Number of attempted contacts:	Waitlist:
Child/Youth accepted to program:	
Date referring agency contacted:	
Follow-up date:	