



OKLAHOMA DEPARTMENT OF HUMAN SERVICES



**Referral for Bridge Resource
Family Assessment**

This form is completed by the resource specialist and submitted to the resource assessment contractor.

Date: _____

Type of resource family assessment(s) requested: Check all that apply.

- Foster care
- Kinship
- Adoption (non-related)
- Adoption (related)
- Interstate Compact on the Placement of Children (ICPC) adoption only
- Conversion resource family assessment from kinship assessment
- Conversion resource family assessment from foster care assessment

Applicant data:

Application date		Pre-resource number		County	
Father					
Date of birth		Race		Tribal affiliation	
Mother					
Date of birth		Race		Tribal affiliation	
Street or P.O. Box mailing address			City		State Zip
Finding directions					
Home phone			Business phone(s)		

Child data: Complete on conversion assessments only.

Name	Date of birth	Race	Tribal affiliation

Legal status and permanency plan for child(ren):

Child welfare staff:

Resource specialist		County	
Work phone/cell phone	Toll-free number 1-800-	E-mail address	
Street address	City	State	Zip
Resource specialist supervisor		County	
Work phone/cell phone	Toll-free number 1-800-	E-mail address	
Street address	City	State	Zip
OKDHS liaison		County	
Work phone/cell phone	Fax		
Street address	City	State	Zip

Attachments: Check all that apply:

- Form 04AN0320E, Adoptive Placement Criteria Staffing, if applicable;
- Form 04FC001E, Initial Kinship Placement Agreement, and three personal reference letters using Form 04AF016E, Resource Family Personal Reference Letter, if applicable;
- Form 04AF023E, Written Plan of Compliance, (WPC);
- Form 04AF004E, House Assessment, completed at initial home visit by resource specialist on all NEW inquiries only. Contractor completes Form 04AF004E, for all conversion assessments;
- Form 04AF001E, Resource Family Assessment Application;
- Form 04AN022E, Child Profile Assessment for Adoption, on the child(ren) the foster or kinship family is interested in adopting for conversion resource family assessments only;
- Form 04AF005E, Notice to Bridge Resource Applicants;
- Form 04AF007E, Records Check;

- Form 04AD003E, Request for Background Check, on all household members 18 years or older;
- Copy of all KIDS Pre-resource or Resource contacts, if a conversion assessment;
- Copy of entire resource record, including re-evaluations and WPC's, for foster and kinship families who are applying to adopt; and
- Any other forms or documentation that the applicant has returned to the referring resource specialist.

Completion time frames

- ICPC (adoption) - 45 days
- Conversion - 60 days
- Kinship - 75 days
- Foster care and/or adoption - 90 days

Completed by contracting agency:

Resource family last name		First name
County	Date referral received	Date assigned to resource contractor
Name of resource contractor assigned to complete assessment		
Mailing address of resource contractor		
Home phone		Business phone

Original - resource assessment contractor

Copy - faxed back to assigned Child Welfare field liaison or designee or area adoption supervisor, as applicable, within three days of receipt of referral.