



CHILD ARRIVAL REPORT

Complete this report immediately upon arrival and submit to Crossroads with your monthly paperwork.

Child:	Age:	Arrival Date:	Arrival Time:
Foster Family:		Caseworker:	
Date Doctor's office called to book initial Medical: <i>Call must be made within 2 working days of placement.</i>			
Initial Medical to occur with 10 working days, Initial dental and optical to occur within 2 months of placement.			
1. Physical description of child (clean, appropriately dressed, etc.)			
2. List any physical concerns. (If applicable, record on the body map provided with the Non-Critical Incident Report any markings including new or healed lacerations, bite marks, burn marks, Mongolian blue spots, birth marks, tattoos, etc.)			
3. Describe child's emotional state upon arrival.			
4. Did the child present any unusual or outstanding behaviors upon arrival? If so, please specify. Yes No			
5. Is the child is on medication? If yes, please list medication(s) and purpose for each: Yes No			
6. Did the child arrive with medication? Yes No			
7. Does it appear that the child needs immediate medical attention? If yes, give details and contact your Support Worker or Crossroads Crisis Line. Yes No			
8. Did child arrive with clothing? If yes, please complete a Clothing Inventory. Yes No			

Caregiver Signature: _____