



Serendipity Devon Ltd
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Exmouth
Devon
EX8 1DW

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Web: www.serendipitydevon.com

Family Placement Agreement

Family Name

Date of Admission

Social Worker's Details

Name

Address

Telephone

Fax

Parent Details

Parent 1

Parent 2

Surname

First Names

Date of Birth

Home Address

Next of Kin Name

Next of Kin Contact Details

Child 1 Details

Surname	<input type="text"/>
First Names	<input type="text"/>
Date of Birth	<input type="text"/>
Legal Status	<input type="text"/>
CP Registration	<input type="text"/>
Date of Next CP Review	<input type="text"/>

Additional Information *(Daily routines, interests, behavioural issues etc)*

Child 2 Details

Surname	<input type="text"/>
First Names	<input type="text"/>
Date of Birth	<input type="text"/>
Legal Status	<input type="text"/>
CP Registration	<input type="text"/>
Date of Next CP Review	<input type="text"/>

Additional Information *(Daily routines, interests, behavioural issues etc)*

Child 3 Details

Surname	<input type="text"/>
First Names	<input type="text"/>
Date of Birth	<input type="text"/>
Legal Status	<input type="text"/>
CP Registration	<input type="text"/>
Date of Next CP Review	<input type="text"/>

Additional Information *(Daily routines, interests, behavioural issues etc)*

Local Authority Details

Team Manager Name

Address

Telephone

Fax

Children's Guardian Details

Name

Address

Telephone

Fax

Visitors Allowed/CRB Checked?

Visitors not Allowed

Monitoring & Observation

Hourly Unit Checks	<input type="text"/>
Key Tasks	<input type="text"/>
Spot Checks	<input type="text"/>
Outside of Unit with Child	<input type="text"/>
Sleeping Night	<input type="text"/>
Waking Night	<input type="text"/>
CCTV in Unit	<input type="text"/>
Audio in Unit	<input type="text"/>
Staff with Family 24 Hours	<input type="text"/>
Other	<input type="text"/>

Drug Screens? Yes No

Restrictions to be Applied

Reason for Admission

Details of work requiring initial attention

Objectives & Intended Outcomes Completed? Yes No

Health & Education Forms Completed? Yes No

Other Significant Information

Signatures to Agreement

Family	<input type="text"/>
	Date <input type="text"/>
Social Worker	<input type="text"/>
	Date <input type="text"/>
Serendipity	<input type="text"/>
	Date <input type="text"/>