

INSTRUCTIONS FOR COMPLETION FAMILY INFORMATION FORM

The Initial Service Coordinator (ISC) must:

- Complete the **Family Information** form prior to the Initial IFSP meeting.
- Send it to the evaluation site with the other required forms detailed in the ISC Responsibilities Policy upon choice of evaluation site by the parent.

If the evaluation site finds that the child is **not eligible**, the completed **Family Information** form must be sent to the Regional Office (RO) with the **Closure Form**.

NOTE: The evaluation site – not the Service Coordinator (SC) - is responsible for submitting the **Evaluation/Screening Summary and Data Entry Forms** and the evaluation/screening reports to the RO.

1. Complete all demographic information requested, printing legibly: the full names of the child, the SC, and the parents. Give all available phone numbers, writing N/A if the number is not available or not applicable.
 - a. Include email addresses only with written parental consent. Refer to the following memorandum on the NYS Department of Health website:
www.health.state.ny.us/community/infants_children/early_intervention/memoranda.htm
Dear Colleague Letter - Clarification to Early Intervention Providers on Parental Consent to Use E-mail to Exchange Personally Identifiable Information
2. **Other Members of Household:** List all individuals residing in the same household as the EI child using the codes listed in the box titled "Relationship Codes" to indicate their relationship to the child.
3. **Foster Care Information:** Complete all items if the child is in foster care.
4. **Child Care Arrangements:** Indicate if the child is in child care and give the name and phone number of the child care provider. This information is collected to help determine possible service settings, and contact information for those settings.
5. **Race/Ethnicity: This information is required by the NYS DOH and the Federal Office of Special Education Programs (OSEP).** Both areas (race and ethnicity) must be completed. *More than one racial designation for a child can be selected.*
6. **Birth History:** Complete as much information as is available.
7. **What brought you to Early Intervention:** Document family concerns related to meeting their child's needs and the primary developmental concerns (ex: "Child is not meeting developmental milestones, like rolling over, playing with toys, and holding her bottle").
8. **Area of Suspected Delay:** Check as appropriate, using the codes above.