**Form B**

**PLACING AGENCY CASE PLANNING ACKNOWLEDGEMENT**

|  |  |  |  |
| --- | --- | --- | --- |
| Last Name of Youth: | | First Name of Youth: | |
| Placing County: | Placing Agency:  CYS  JPO  MCO | |

The above referenced placing agency completes one or more of the following case planning documents:

Case Plan

Family Service Plan

Family Plan

Service Plan

Child Permanency Plan

Individual Service Plan

Field Case Plan

Other:

Not applicable

Please provide a copy of this most recent document(s) identified above for George Junior Republic in Pennsylvania’s record and the coordination of goal development and therapeutic services. Reviews and updates of this document will be forwarded to George Junior Republic in Pennsylvania upon completion.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| ***Placing Agency Representative***  ***Printed Name*** | ***Placing Agency Representative***  ***Signature*** | ***Date*** |