Application to the response team

Aurland municipality

Children and adolescents

The child's name		ID number	School/kindergarten
name			Grade
			Grade
Other children in the family	Name: Age: Name:		
	Age:		
Name and address of the guardians			Phone
Name and address of the guardians			Phone
The child's general practitioner			Medical centre
What do you need help with?			

The application is:	processed by the response team, which is made up of a community general			
The application is processed by the response team, which is made up of a community general				
practitioner, psychiatric nurse, nurse, municipal psychologist, school, kindergarten, The Educational				
Psychological Cour	nselling Services, The Child Welfare Services, and the Child and adolescent			
	psychiatry clinic (BUP).			

We would like to present an offer as fast as possible. The response team hold a meeting once a month, and you will receive feedback when the application has been discussed, potentially with suggestions with regards to measures.		
Date/signature of member of the response	I am/we are familiar with a multidisciplinary	
team	discussion	
	Date/ signature of parents/guardians	