



# PLACEMENT/RESPIRE ORIENTATION CHECKLIST

Youth's Name (Please Print) \_\_\_\_\_ Date of Placement \_\_\_\_\_

**WITHIN 24 HOURS OF PLACEMENT** all youths placed in Colorado foster homes shall be given an orientation to the new placement. At a minimum, the orientation shall include the items which follow.

**Physical Condition Upon Arrival (bruises, marks, physical appearance, good health, etc.)**

NOTE: If bruises do exist and photos have not already been taken, please take photos.

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**By my signature I indicate the following were reviewed with me (youth).**

NOTE: If child is an infant and unable to be oriented, then indicate so here. \_\_\_\_\_

- \_\_\_ Tour of foster home.
- \_\_\_ The foster family's names, their address and phone number(s), in written form.
- \_\_\_ Instruction on fire safety, this includes fire alarm and fire evacuation procedures and the outside meeting place for emergency evacuations.
- \_\_\_ Instruction on tornado safety, this includes tornado drills, evacuation procedures and the meeting place in the event of this type of emergency.
- \_\_\_ The rules of the foster home.
- \_\_\_ Possible consequences for rule infractions.
- \_\_\_ A copy of Maple Star's policy on Children's Rights. (Not applicable for respite placements.)
- \_\_\_ A copy of Maple Star's Grievance Procedures policy. (Not applicable for respite placements.)
- \_\_\_ A written list of the names, addresses, and phone numbers of my (youth's):  
(Please insure respite providers are given the names and numbers of the youth's service team.)
  1. *Guardian ad litem*
  2. Defense attorney (for delinquency actions only)
  3. Probation officer (for delinquency actions only)
  4. Youth Manager (for delinquency actions only)
  5. DHS Case Worker
  6. Therapist (if applicable)
  7. MSC Home Supervisor

Youth's Signature (IF AGE 5+): \_\_\_\_\_ Orientation Date (**Within 24hrs of DOP**): \_\_\_\_\_  
 If youth under Age 5; CW must initial: \_\_\_\_\_ Orientation Date (**Within 24hrs of DOP**): \_\_\_\_\_  
 Foster Parent's Signature: \_\_\_\_\_ Orientation Date (**Within 24hrs of DOP**): \_\_\_\_\_  
 HS confirmation (initials): \_\_\_\_\_