



SUBMIT FOR PRIOR AUTH REVIEW? _____ Yes _____ No			
If yes, _____ Initial	_____ Re-Authorization		
If yes, _____ Day Treatment	_____ RCCCY	_____ Foster Care	
_____ Group Home	_____ Independent Living		

WRAPAROUND MILWAUKEE

POC/Child and Family Team Meeting Signature` Sheet

POC Date: _____
 Youth Name: _____ Date of Birth: _____
 Care Coordinator Name/Agency Name: _____

REQUIRED TEAM MEMBER SIGNATURES

		<u>In Attendance?</u>	
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	_____	_____
Youth	Phone	E-mail address	
_____	_____	_____	_____
Parent/Legal Guardian	Phone	E-mail address	
_____	_____	_____	_____
Parent/Legal Guardian	Phone	E-mail address	
_____	_____	_____	_____
Care Coordinator	Phone	E-mail address	
_____	_____	_____	_____
Care Coord. Supervisor	Phone	E-mail address	
_____	_____	_____	_____
Consulting Psychologist	Phone	E-mail address	
_____	_____	_____	_____
Consulting Psychiatrist	Phone	E-mail address	

✓ Client Rights
Reminder

Enrollee/parent/
legal guardian:

By signing this form you do not give up your right to grieve or appeal what is written in this Plan or the services you are receiving.

SIGNATURES OF ADDITIONAL TEAM MEMBERS

_____	_____	_____	_____
Team Member	Relationship To Youth	Phone	E-mail address
_____	_____	_____	_____
Team Member	Relationship To Youth	Phone	E-mail address
_____	_____	_____	_____
Team Member	Relationship To Youth	Phone	E-mail address
_____	_____	_____	_____
Team Member	Relationship To Youth	Phone	E-mail address

POC Date: _____

Youth Name: _____ **Date of Birth:** _____

Care Coordinator Name/Agency Name: _____

SIGNATURES OF ADDITIONAL TEAM MEMBERS

Team Member	Relationship To Youth	Phone	E-mail address
Team Member	Relationship To Youth	Phone	E-mail address
Team Member	Relationship To Youth	Phone	E-mail address
Team Member	Relationship To Youth	Phone	E-mail address
Team Member	Relationship To Youth	Phone	E-mail address
Team Member	Relationship To Youth	Phone	E-mail address
Team Member	Relationship To Youth	Phone	E-mail address
Team Member	Relationship To Youth	Phone	E-mail address
Team Member	Relationship To Youth	Phone	E-mail address
Team Member	Relationship To Youth	Phone	E-mail address
Team Member	Relationship To Youth	Phone	E-mail address
Team Member	Relationship To Youth	Phone	E-mail address