CRISIS INTERVENTION FUNDS REQUEST/AUTHORIZATION, CS-81
FORM INSTRUCTIONS

Purpose:

The Crisis Intervention Funds Request/Authorization, CS-81, is used to:

a. Document a request for accessing Crisis Intervention Funds
   b. Identify what is requested
   c. Identify the dollar amount needed
   d. Identify the vendor
   e. Identify the family for whom the request is being made.

Number of Copies and Distribution:

The CS-81 is to be completed with the required supporting documentation attached. Copies may be made for record-keeping, but the original request is to be maintained in the case record.

Instructions for Completion:

Date of Request: Enter the date the request is being made.

Case Name: Enter the name under which the case is being opened.

DCN: Enter the DCN of the case name member.

Type of case (documentation to be attached): The Children’s Service Worker is to check which type of service case the family is participating in, based on the case name’s record. Documentation required for each case type is noted.

There is a risk of child maltreatment within the family due to: Identify the stress occurring within the household that may result in child maltreatment. An example might be, “Lack of food due to limited income.”

The family has attempted to prevent the current crisis by: List all activities the family has performed to remedy the current crisis. The worker should explore what the family has done when facing the crisis in the past, what resources they had, and what they have done on this occasion to access those resources.

Item(s) requested and dollar amount requested: The item or service being requested is to be identified here. Enter the total dollar amount needed to purchase the item/service selected. Be certain the total for an item/service given by a vendor includes all taxes and other miscellaneous costs (i.e., delivery fee, service call, etc.).

Vendor Name(s)/Address: Enter the name(s) and address(es) of the vendor(s) who has the item/service being purchased and has agreed to the purchase of that item/service.

Signature of Worker: The Children’s Service Worker completing the form is to sign this line.

Date: Date entered is the date the Children’s Service Worker completes the form and signs their name.
**Review of Request/County Designee:** This section is for the county designee to note they have reviewed the request for Crisis Intervention Funds and the required documentation. The county designee may agree or deny the request for funds. They are to circle “agree” or “deny”, depending upon their response to the request. In the space allotted, a brief statement is to be given regarding the reason for their decision.

**Signature of County Designee:** The county designee is to sign the request for Crisis Intervention Funds, and by doing so, is confirming they have reviewed the request and are confirming all required documentation is attached to the form.

**Date:** This date is the date the county designee approves or denies the request for Crisis Intervention Funds.

**Review of Request/Other County/Regional Signature:** A second authorizing designee is required when approval is being requested for a family that is over the $300 maximum in a six (6) month period of time or if a request is being made in excess of two times for a family within a six month period of time. This section is for the staff acting as the second authorizing designee to note they have reviewed the request for Crisis Intervention Funds. The second authorizing designee may also agree to or deny the request for funds. They are to circle “agree” or “deny” depending upon their response to the request. In the space allotted, a brief statement is to be given regarding the reason for their decisions.

**Date:** This date is the date the second authorizing designee reviews and approves or denies the request for Crisis Intervention Funds.

**Instructions for Retention:** The original copy of this form is to be retained until the case record is destroyed as specified in the Child Welfare Manual.

**Memoranda History:** CS95-3, CD10-29