

Internal Use Only:	
Referral Date	_____
Referring Agency	_____
Interviewer on trip	_____
MU Trip Date(s)	_____



Flagstaff Medical Center
Northern Arizona Healthcare

Safe Child Center 928-773-2053
Email to: fmcsafechild@nahealth.com
Fax to: 928-773-2434

Safe Child Center/Childhelp Mobile Unit Request Form

Interviewing child victims is best done as soon as possible to preserve memory, limit contamination, and begin healing. Best practice for conducting forensic interviews with individuals who have disabilities is to provide a stable, quiet environment with few external stimuli. To provide for the well being of the individual(s) and to ensure the best outcome for the investigation, victim(s) with disabilities will be interviewed at Safe Child Center.

Safety is our utmost priority. Upon inclement weather it will be the responsibility of Childhelp Mobile Unit Driver, Lee Jones, to determine if the roads are safe for travel. If a Mobile Unit trip is cancelled, it will be rescheduled as soon as possible. Children can also be brought to Safe Child Center for services.

Once this request form and intakes are received, available dates will be discussed with all concerned. You will receive an email message confirming the scheduled Mobile Unit trip. Thank you for your help in making the Mobile Unit program a success. If you have any questions about scheduling a Mobile Unit trip, please contact Alyssa Bohl, Office Coordinator II, at (928) 773-2053 or email FMCsafechild@nahealth.com.

10 am - Child's name: _____ Agent observing: _____
 VS or SS attending: _____
 Completed Intake form attached: **Yes** or **No**

12pm - Child's name: _____ Agent observing: _____
 VS or SS attending: _____
 Completed Intake form attached: **Yes** or **No**

2pm - Child's name: _____ Agent observing: _____
 VS or SS attending: _____
 Completed Intake form attached: **Yes** or **No**

Location where mobile unit is to park: _____

Contact name at that location: _____

Contact phone # at location: _____

Directions (if this is a new location for Mobile Unit): _____

Person completing this form: _____ Phone: _____

Any concern or problems with Mobile Unit, please contact Susann Clinton, FNP, Safe Child Center Lead at (928) 773-2053 or Childhelp Director at (602) 271-4500.