All of us want happy, healthy, well-rounded children. However, there can be times when meeting that goal is difficult. Whether your family is facing changes or your child is showing behaviors that you’re unsure of, we can help!

The Nest Program is designed to help the whole family. This in-home parenting program focuses on your family’s strengths and facilitates attainable goals that will support it for years to come. Our approach includes connecting, empowering, and correcting principles based in TCU’s Trust-Based Relational Intervention (TBRI). This method is evidence-based and results driven, so we are able to best help your family.

For more information on the program and the unmatched benefits, please visit theparentingcenter.org or call Program Director Kathryn Thalken at 817-632-5537.
In order to be eligible for this program, the family must answer **YES** to the following questions:

- Do you have a child/children between the ages of 3 and 16 years old? □ Yes  □ No
- Does the child/children live with you at least half of the time? □ Yes  □ No
- Do you currently reside in Tarrant County? □ Yes  □ No
- Are you willing to commit to 10 sessions with a Parent Coach? □ Yes  □ No
- Are you willing to make a life change? □ Yes  □ No

Have you or your child experience one of the following (check all that apply):

- □ Moderate/high stress in family
- □ Difficult/stressful pregnancy
- □ Difficult/complicated birth
- □ Early hospitalization (birth-3 years old)
- □ Abuse or neglect
- □ Trauma of some kind (domestic violence witness, natural disaster survivor, divorce, etc.)
- □ Adoption or foster care
- □ Other: ________________________________

Is there a current open CPS case? □ Yes  □ No

A current open case will be considered for services.

What is the presenting issue for the family? ________________________________

______________________________

______________________________

______________________________

Referrer By: ________________________________

Agency Name (if applicable): ________________________________

Date Referral Sent: ____________________________

Email: ________________________________

Phone: ________________________________

If this form is being filled out by an agency, is the client aware of this referral? □ Yes  □ No

**Please fax back to 817-332-6489 attention: Kathryn Thalken or email to kthalken@theparentingcenter.org.**