Residential Treatment Checklist (Regulation 4) –
Incoming To Florida from another state
(Parent/Relative/Guardian Request)

☐ Sending State Transmittal form (1 copy)

☐ 100A – 1 copy

Section I
☐ Completed showing parent or guardian is responsible for planning for child and is financially responsible for child

Section II
☐ Type of care requested, Residential Treatment Center

Legal Status
☐ Parent/Relative Custody/Guardianship

Section III
☐ Signature of the parent/relative/guardian and date

☐ 100B – 1 copy (If the child has been placed without prior approval)

Section I
☐ Demographic information is completed

Section II
☐ Initial placement section is completed (including the date of child’s placement)

Section IV
☐ Parent/Relative/Guardian signature/date
☐ Signature of Sending State Compact Officer

Packet Requirements (1 copy)
☐ Letter of acceptance from the residential facility
☐ Current court order or legal document [gives the relative/guardian authority to place the child (if applicable]
☐ Financial/Medical Plan [detailed letter from parent/guardian which describes their responsibility for payment of the cost of placement in the facility, the name and address of the person or entity that will be making payment and the person or entity who will otherwise be financially responsible for the child]
☐ Placement disruption agreement