

**UC Basic Information**

First Name: Yuvitza Merari **AKA:** Test Record
Last Name: Tevalan Vazquez **Status:** IN-TRANSFER
Date of Birth: 10/16/2009 (Age 14) **Admitted Date:** 7/30/2018
A#: 333098765 **Length of Stay:** 2012 Days
Country of Birth: Rwanda **Current Program:** A New Leaf – Dorothy Mitchell
Gender: M **Portal ID:** 689239

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UC Case Status**Child Assessments**

Initial Intakes Assessment **Last Updated:**
Assessment For Risk **Last Updated:**
UC Assessment **Last Updated:**

Medical

Initial Medical Exam **Date Evaluated:**
TB Screening **Outcome:**
Immunizations (IME Only) **Last Updated:**

Home Study and Post-Release Service Cases

Home Study **Type of Home Study:** **Date Referred:** **Date Accepted:**
Post Release Services **Type of PRS:** **Date Referred:** **Date Accepted:**

Family Reunification**Sponsor**

Sponsor Assessment **Date Completed:**
Family Reunification Application Sent to Sponsor **Date Sent:** 01/01/2024 12:00PM **Date Received:**
Authorization For Release of Information (ARI) **Date Received:** N/A
Proof of Sponsor Identity **Date Completed:**
Proof of Sponsor Address **Date Completed:**
Proof of Relationship Between UC and Sponsor **Date Completed:**

Household Members

Authorization For Release of Information (ARI) **Date Received:** N/A

Alternate Adult Caregiver

Authorization For Release of Information (ARI) **Date Received:** N/A

[>| Save](#)**Background Checks****SPONSOR** **ADULT HOUSEHOLD MEMBERS & ALTERNATE ADULT CAREGIVER****Sponsor Name:****Background Checks**

Type	Date Requested	Date Results Received	Results
Internet Criminal			
Sex Abuse History			
CA/N			
FBI Criminal History			

FBI Criminal History Fingerprinting Details**Method of Fingerprinting:** **FieldPrint**

First available FieldPrint fingerprint appointment* **Date available:**
Accepted FieldPrint fingerprint appointment **Date of appointment:**

Method of Fingerprinting: **ORR Digital Site**

First available ORR Digital Site fingerprint appointment* **Date available:**
Accepted ORR Digital Site fingerprint appointment **Date of appointment:**
ID sent to ORR Digital Site **Date sent:**
ARI sent to ORR Digital Site **Date sent:**

Method of Fingerprinting: **Paper Fingerprint Card**

Fingerprint cards sent to adult by case manager **Date sent:**
Complete fingerprint cards received by PSC **Date received:**

[>| Save](#)**Know Your Rights and Legal Screening:** **Date Completed:****Release Recommendations**

Case Manager Release Request: **Last Updated:**
Case Coordination Release Request: **Last Updated:**
ORR Release Request Decision: **Last Updated:** **Release Approved:**

Case Manager Information **Update my Information****Primary Case Manager Information**

Primary Case Manager Name: Case Manager **Assigned on:**
Primary Case Manager Email Address:
Primary Case Manager Phone Number:
Primary Case Manager Organization:

Previous Case Manager Information

Previous Case Manager Name: **Assigned on:**
Previous Case Manager Email Address:
Previous Case Manager Phone Number:
Previous Case Manager Organization:

Unification Specialist Information **Update my Information****Primary Unification Specialist Information**

Primary Unification Specialist Name: Case Manager **Assigned on:**
Primary Unification Specialist Email Address:
Primary Unification Specialist Phone Number:
Primary Unification Specialist Organization:

Previous Unification Specialist Information

Previous Unification Specialist Name: **Assigned on:**
Previous Unification Specialist Email Address:
Previous Unification Specialist Phone Number:
Previous Unification Specialist Organization: