

Voluntary Placement Agreement

This is an agreement between Quiet Creek Farm, Inc. and the Resident and Financially responsible person of:

Name: _____

Date of Birth: _____ Social Security Number: _____

RESIDENT AND FINANCIALLY RESPONSIBLE PERSONS AGREE:

I agree that the above named person be placed in the care and under the supervision of Quiet Creek Farm, Inc. I authorize Quiet Creek Farm to carry out the duties and responsibilities as described later in this agreement.

I agree that I will assume the following responsibilities:

1. To pay the sum of \$3900 per month for the care and support of the resident. It is understood that no portion of that sum is refundable should the residency be terminated short of any 30 day period, by the resident or by Quiet Creek Farm, Inc., due to disciplinary problems.
2. To provide a fund of \$350 for emergency medical and damage repairs;
3. To provide a monthly stipend of \$250;
4. To maintain personal contacts with the resident;
5. To abide by a telephone restriction for the 1st 30 days by not accepting calls from the resident during that time. It is understood that the financially responsible person may communicate with the staff at Quiet Creek Farm, Inc., at any time, and that the resident may send and receive mail during the blackout period. It is understood that the purpose of this blackout is to assist the resident in dealing with homesickness, to sever connections with negative peer groups, and to settle into the day to day activities;
6. To provide Quiet Creek Farm, Inc., with all psychiatric or psychological test results, as well as pertinent summaries. These records will be provided as soon as possible if they don't accompany the resident upon his arrival.

Quiet Creek Farm, Inc. agrees:

1. To develop an individual plan to deal with personal or emotional problems, so that the resident can be returned to his primary family, or be able to deal with the problems or everyday living;
2. To keep the financially responsible person, with the permission of the resident, advised as to the nature of the program, the steps being taken to implement it, and the progress of the plan;

Resident

Date

Financially Responsible Person

Date