



Children's System of Care/PerformCare

Applicants Name: _____

Birthdate: _____

Date of Eligibility _____ **Cyber #** _____

Care manager (if applicable) _____

Current Services: _____

In-Home Provider (If applicable): _____

Other:

Helpful Resources

- **PerformCare:** 1-877-652-7624 — 24 hours a day, 7 days a week, 365 days a year
- **Website:** www.performcarenj.org
- **PerformCare's Youth and Family Guide - call for additional language options:**
 - **English** (bit.ly/english_youthandfamilyguide)
 - **Spanish** (bit.ly/spanish_guiaparajovenesyfamilias)



The Arc of New Jersey Family Institute

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