INLAND REGIONAL CENTER (FICTIONAL TEST RECORD)

Intake Application - Page 2 of 13: Applicant's Information

First Name: Ava Middle Name: R Last Name: Muestra

Date of Birth: 01/17/2021 Place of Birth (City/State): San Bernardino, CA

Gender: [ ] Male [X] Female Ethnicity: White

Who does the applicant live with? [X] Mother [X] Grandparent

Street: 88 Sample Road City: Exampleville State: CA Zip: 90020

Primary Phone Number: (555) 040-0101 E-Mail Address: grace.muestra@example.com

Preferred Spoken Language: English

Emergency Contact: Helen Muestra (maternal grandmother) (555) 040-0102

Health insurance: Kaiser Permanente (commercial) through mother's employer.

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Mother: Grace Muestra Maiden Name: Muestra

Date of Birth: 10/02/1990 Place of Birth: San Bernardino, CA

Highest Education Level: Bachelor's degree Job Title: Medical assistant

Father: not involved

Parents' Marital Status: Single

SIBLING INFORMATION:

None

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BIRTH HISTORY:

Born at Example Medical Center at 37 weeks by planned C-section (prenatal diagnosis of Down syndrome).

Birth weight 6 lb 1 oz. Stayed 5 days in the NICU for feeding support. Heart echocardiogram showed a small ASD that closed b

DEVELOPMENTAL MILESTONES:

Sat alone: 11 months Crawled: 15 months Walked: 26 months

First words: 30 months (now uses about 40 words and some signs)

Toilet trained: daytime, with reminders, since age 5

When did you first become concerned? Ava was diagnosed with Down syndrome before birth and received Early Start services

MEDICAL:

Primary doctor: Dr. Example Family, Exampleville Family Medicine (555) 040-0200. Last physical: 08/2026.

Hypothyroidism, treated with levothyroxine daily. Wears glasses. Mild hearing loss in the left ear.

No seizures. No allergies.

SCHOOL:

Transitional kindergarten, special day class, Example Unified School District.

IEP dated 04/2026: eligibility Intellectual Disability; speech, occupational therapy and adapted PE.