## INLAND REGIONAL CENTER (FICTIONAL TEST RECORD)

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

First Name: Sam  Middle Name: J  Last Name: Prueba

Date of Birth: 02/02/2023  Place of Birth (City/State): Moreno Valley, CA

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

Who does the applicant live with? [X] Parents

Street: 301 Demo Avenue  City: Testville  State: CA  Zip: 90012

Primary Phone Number: (555) 050-0101  E-Mail Address: chris.prueba@example.com

Preferred Spoken Language: English

Emergency Contact: Pat Wells (maternal aunt) (555) 050-0102

Health insurance: Medi-Cal, Molina plan.

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## Intake Application - Page 3 of 13: Family

Mother: Chris Prueba  Maiden Name: Wells

Date of Birth: 06/21/1996  Place of Birth: Los Angeles, CA

Highest Education Level: High school  Job Title: Delivery driver

Father: Jordan Prueba

Date of Birth: 12/09/1995  Place of Birth: Moreno Valley, CA

Highest Education Level: Associate degree  Job Title: Electrician

Parents' Marital Status: Married

SIBLING INFORMATION:

Riley Prueba  DOB 09/03/2024  Resides w/Applicant: Yes  Relevant History: None

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### Intake Application - Page 5 of 13: Birth, Development and Health

BIRTH HISTORY:

Born at 34 weeks at Example Regional Hospital by emergency C-section for preeclampsia.

Birth weight 4 lb 11 oz. Stayed 18 days in the NICU for breathing and feeding support.

DEVELOPMENTAL MILESTONES:

Sat alone: 9 months  Crawled: 12 months  Walked: 20 months

First words: 26 months (now about 25 words, some two-word phrases)

Toilet trained: not yet

When did you first become concerned? Pediatrician referred at the 2-year check for speech and motor delays; family also notice

MEDICAL:

Primary doctor: Dr. Example Child, Example Kids Clinic (555) 050-0200. Last physical: 05/2026.

Asthma, uses an albuterol inhaler as needed. Ear tubes placed 11/2025. No seizures.

Allergy: penicillin (rash).

SCHOOL:

Not enrolled in school yet. On the waitlist for a district preschool assessment.