

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Child and Family Services Agency



CHILD'S NAME:

DOB:

**STATEMENT OF CASE MANAGER/POTENTIAL PLACEMENT/PARTY
UNDER ICPC REGULATION 2 (Regular ICPC)**

Pursuant to the requirements of Regulation 2, Section 5(d) of the Interstate Compact on the Placement of Children (ICPC), I, _____ {full legal name}, certify that the following information is true:

1. I have communicated directly with the potential placement resource, _____ [name of person with whom child to be placed].
2. The potential placement resource is ___/is not___ interested in being a placement resource for the child and is ___/is not___ willing to cooperate with the ICPC process.
3. The name, correct address, available telephone number or other contact information, and date of birth of the placement resource is as follows:

_____ Name of placement resource

_____ Address of placement resource

_____ City/State/Zip Code

_____ Telephone numbers/contact information

4. The name, correct address, available telephone number or other contact information, and date of birth of all adults in the home is as follows:

_____ Name of adult

_____ Mailing Address of placement resource

_____ Physical Address of placement resource

_____ City/State/Zip Code

_____ Telephone numbers/contact information

5. The number and type of rooms in the proposed residence is sufficient to accommodate the child as follows:

Number of bedrooms: _____

Number of adults residing in the home: _____

Number of children residing in the home, including child to be placed: _____

6. _____ [*name of person with whom child to be placed*] has or will access financial resources to feed, clothe, and care for the child, including child care.
7. _____ [*name of person with whom child to be placed*] acknowledges that a criminal records and child abuse history check will be completed on any persons residing in the home to be screened under the law of the receiving state.

OR

Due to the following, the ICPC home study will not be pursued:

- _____ inability to make contact with proposed placement, despite several attempts
- _____ proposed placement not interested in being a placement resource for the child
- _____ proposed placement unwilling to provide demographic information on others residing in the home
- _____ insufficient size of home
- _____ insufficient financial resources to provide for the child
- _____ proposed placement unwilling to submit to a criminal records and child abuse history checks

Signature

Dated:

Title:

Printed Name:

Address:

City, State, Zip:

Telephone Number:

Fax Number: