INTERSTATE COMPACT ON
THE PLACEMENT OF CHILDREN

Social and Rehabilitation Services
Children and Family Services
Docking State Office Building, 5th Floor
915 SW Harrison Street
Topeka, KS 66612
Office Receptionist (785) 296-4653
Fax (785) 368-8159

Please address referrals or questions to the appropriate staff below:

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<th>COMPACT SPECIALIST (Assigned by Last Name of the Oldest Child)</th>
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INTERSTATE COMPACT ON PLACEMENT OF CHILDREN
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What is A Compact?

SECTION 1
A compact is a legal agreement among persons, nations, or states. It is a contract between parties which creates obligations and rights capable of being enforced, and contemplated as such between parties, in their distinct and independent characters.

An interstate compact creates a relationship when adopted by state legislatures that is governed by constitutional law. Because it is a contract among states, each state the legislature must adopt, verbatim, the compact language presented to them to avoid default. This ensures against the possibility of a misunderstanding between states due to language alteration. *ICPC is such a law.* This uniformity assures that the compact’s provisions are the same in every state and territory.
What is the Purpose and Policy of the Interstate Compact on the Placement of Children?
(Refer to Article I, Page 55)

The Interstate Compact on the Placement of Children (ICPC) was enacted to:

A. Protect children by assuring placements are safe prior to placing children across state lines. It enables the receiving state to refuse placement of a child in those situations where the safety and well being of the child is questionable.

B. Provide prospective placements to receive adequate information about the child in order to make an informed decision regarding placement.

C. Provide safety measures which allow each state to determine the best possible placement for the child.

D. Provide supervision and services, once child is placed.

E. Maintain jurisdiction/custody of sending state until both states concur to closure.

F. Establish payment responsibility.
Interstate Compact – Is it the Law?

The Interstate Compact on Placement of Children (ICPC) is a legally binding agreement among the fifty states, the District of Columbia and Virgin Islands. It has been adopted uniformly by all parties and therefore has the effect of law. Kansas joined the Compact in 1976. (Refer to KSA 38-1201.)

It is the policy of this state to cooperate fully with other states in providing that no children shall be sent or brought into any other party state . . . unless the sending agency shall comply with each and every requirement set forth in the compact.

A. Compliance with Interstate Compact is **mandatory** and is not discretionary.

B. The court cannot override the Compact Law. Courts are specifically included as the “sending agencies”, as defined in Article I. ICPC is statutory law in each of the enacting states. (U.S. Constitution Article 1, Section 10). The Compact receives the protection of the Contract Clause of the U.S. Constitution, which is to the effect that a state may not impair the obligation of a contract.
The Law Requires:
(Refer to Article III, Page 57)

1. Prior evaluation of the proposed resource to ensure a safe and suitable home or child caring arrangement.

2. Prior approval of proposed resource before child may be placed in the receiving state.

3. Placement is not contrary to the child’s welfare.

4. Compliance with the laws of both states.

5. Post-placement supervision to ensure the placement, once made, continues to be safe and suitable.

6. Distribution of responsibilities among sending agencies and receiving states, especially in the event that a placement breaks down.

7. Courts maintain jurisdiction until sending state receives written concurrence from the receiving state that case may be closed.
NEW FEDERAL LAW

Safe and Timely Interstate Placement of Foster Children Act of 2006


This Law:

• Requires states to evaluate the home environment in accordance with applicable requirements of the state in which the home is located (i.e., receiving state);

• Requires states to conduct, complete, and report the results of a home study (i.e., home evaluation) within 60 days after a state receives a request from another state;

• Provides states an additional 15 days to complete and report the home study results begun on or before September 30, 2008, if not completed within 60 days for reasons beyond the receiving state’s control if:
  • the receiving state requests missing documents from the sending state within 15 days after receiving the request for the home study; and;
  • documents the circumstances involved and certifies that completing the home study is in the best interests of the child;

• Will not require the receiving state to have completed the parts of the home study that involve education and training for prospective foster or adoptive parents.

A $1,500 incentive will be paid to the states that meet conditions of being an incentive eligible state for a fiscal year if:

• The state completes and provides a report of the results of an interstate home study within 30 days after receiving the home study request.

• The state is a home study incentive-eligible state for a fiscal year and has an approved plan as provided within section 473 B (b).

• The state is in compliance with the data requirements if the state provides to the Secretary of HHS a report of the preceding fiscal years:

  1) Total number of interstate home studies requested by a sending state for foster children under its responsibility and the identity of the state
involved; and

2) The total number of timely home studies completed by the receiving state for other states and the identity of the state involved.

• based on data submitted and verified, a state has completed a timely interstate home Study during the fiscal year.

Note: A foster care or adoption home study as defined by the new federal law is NOT the same as the full home study requirements as defined within the state of Kansas. In order to meet the established time frames and to be in compliance with the law, the home study is a report of the home environment including KBI/CANIS checks. Full approval and recommendation for placement will occur once the family has completed all requirements including PS MAPP.
NON COMPLIANCE
(Refer to Article IV, Page 58)

What happens if I do not comply with the ICPC?

* Violation of Kansas Law - Misdemeanor

* Possible Lawsuit Filed by Receiving State

* Places a Kansas Child at Risk:
  Placement may be unsuitable
  Other State may refuse to provide services (Home study)
  May require child to be returned to Kansas

* Jeopardize License to Operate a Child Placing Agency

* Violation of Foster Care/Adoption Contract with SRS

* Unethical to Violate State Laws
Retention of Jurisdiction

SECTION 2
Why is it Important to Retain Jurisdiction?
(Refer to Article V, Page 59)

- The sending state’s court shall retain jurisdiction over the child sufficient to determine all matters in relation to custody, supervision, care treatment and disposition the same as if the child remained in the sending state.

- The Sending Agency continues to have financial responsibility for any child placed into another state until both state’s ICPC offices concur (in writing) with closure.

Why Courts Should Not Terminate Jurisdiction Prematurely

Judges become frustrated with the additional time required before case termination is acceptable to the Receiving State.

However, when courts terminate jurisdiction before all requirements of the Compact are met, it is a violation of Kansas law.
Key Language in Secretariat’s Opinion

The courts may not dismiss a case once ICPC has been initiated until the receiving state has approved the placement and provided required supervision (usually 6 months).

AND

After supervision has been completed, the receiving state has forwarded a final written report to the sending state ICPC office, concurring with closure.

When the receiving state concurs with closure:

A. Child may now be legally adopted, or
B. Permanent custody may be given to parent
C. Guardianship/custodianship may be awarded to a relative
D. Child has reached majority or has become self-supporting (emancipation)
When May the Court Place a Child Across State Lines without ICPC Approval?

SECTION 3
Instances Where the Court may Place a Child with a Relative or Parent Across State Lines without ICPC

If ICPC has not been initiated, the judge may place a child with a parent or relative in another state as long as jurisdiction is terminated at the time of placement. This normally occurs when the parent receives permanent custody or relative is given legal guardianship or custodianship.

Remember!

Once jurisdiction is terminated, Kansas no longer has legal authority of the child and, therefore, the receiving state may not provide services or supervision.

The parent or relative may apply for assistance in their state, but may not qualify. It is very important that a signed court order be provided to the family before leaving Kansas, showing they have legal custody.
Types of Cases Subject to ICPC

SECTION 4
Placements Subject to ICPC

The following situations are subject to prior approval by the receiving state before a child can be placed.

A. Reintegration with the birth parents(s) in another state. This provision is applicable to children in Need of Care in custody of a licensed child placing agency, the public social services, or an individual with whom the court has awarded custody but has maintained jurisdiction.

B. Placement with relatives whenever the court has jurisdiction of the child to be placed.

C. Placement with a non-related person (foster care). This provision is applicable whether or not there is a court of jurisdiction.

D. Placement in a licensed residential treatment facility. This includes placements by parents having legal custody and court is not involved.

E. Placement with an adoptive family. All families shall be assessed and pre-approved by the public social service agency, a licensed child placing agency or by a social worker authorized to complete adoptive family assessments in the family’s resident state. Approval is contingent upon adherence to the state laws governing adoptions in both the sending and receiving states.
Types of Cases Not Subject to ICPC

SECTION 5
Types of Cases Not Subject to ICPC
(See Article VIII and Secretariat’s Opinion, Pages 64-65)

When there is no court jurisdiction involved:

A. Birth parent to birth parent

B. Birth parent placing their child with relatives:
   - parent(s)
   - step-parent
   - grandparent
   - adult sibling
   - adult aunt or uncle
   - legal guardian

C. Relative to relative. Same relatives as above have such authority.

Exempt even if court has jurisdiction:

D. Placements into boarding schools

E. Placement of a child in a public or private hospital, psychiatric hospital or medical facility; providing the hospital is not also licensed as a residential treatment center. (If that is the situation, approval through ICPC is required.)

F. Divorce and/or custody investigations

G. International adoptions when Office of Immigration and Naturalization Services (INS) has issued a IR-3 Visa for the child.

H. Services requested through International Social Services (ISS) or any branch of its overseas offices.

I. Youth in the Job Corp and military

J. Tribal placements
Sending a Child On a Visit

Section 6
**Out of State Visitation Policy**  
(Refer to Regulation 9, Page 75)

Out of state visitation may occur prior to ICPC involvement. Visits are limited to 30 days and have a specified beginning and ending date.

**NOTE – There is no such thing as an “extended visit”. At the end of 30 days, the child must return to Kansas.**

Once an ICPC referral has been received, out-of-state visits are not recommended.

- The receiving state may consider this a placement – and a violation of the Compact.

If you feel that it is imperative that a visit take place after submitting a request through ICPC, we request that you:

- Wait at least 30 days before sending child on a visit and notify Kansas ICPC by email at least 2 weeks in advance. (This allows the receiving state the time to assign a worker and make initial contact with the family).

- Notification will be forwarded to the receiving state by KS ICPC. Should the receiving state take issue, the visit may not occur.

If visits have been occurring with family on a regular basis before submitting home study request, make note in your cover letter and request permission for those visits to continue, while the home study is being completed. Provide your name and phone number and request the receiving state worker to contact you directly to discuss. Should they require visits to cease, we must comply.
Responsibilities of Sending and Receiving State ICPC Offices

SECTION 7
Responsibilities of Sending State’s ICPC

• Reviews and Forwards Referrals

• Assures Compliance with State Laws

• Monitors Flow of Reports

• Resolves Problems

• Ensures Ongoing Compliance and Goodwill Between States

Responsibilities of Receiving State’s ICPC

• All of the above, plus

• Approves or Denies Placements

• Concurs with Dismissal of Sending State’s Custody or Return of Child to Sending State
Responsibilities of CW/CBS Provider Staff

SECTION 8
Monitoring Responsibilities:

(1) Monitors all cases to assure that all required services are being provided.

(2) Ensures that all out-of-state placements are in compliance with the Compact and notify your ICPC liaison should any changes in placement occur.

(3) Keep others (GAL, prosecutor, court, etc.) informed of the need to adhere to ICPC requirements.

(4) Notify the Kansas ICPC Specialist of Compact violations through your ICPC liaison.

(5) Ensure ICPC approval from the receiving state is received prior to allowing the child to be placed and prior to requesting consent to adopt. (The 100A (CFS-4013) Interstate Compact Placement Request form is a legal binding contract which will be marked either approved or denied with signature by receiving state ICPC office.)

Responsibilities Once Out-of-State Family Has Been Identified:

(1) Prepare the referral packet and forward to their own ICPC liaison for review and signature. The liaison will then forward to the Kansas ICPC office. (See Checklist, page 33.)

(2) Provide ongoing planning for the child

(3) Make travel arrangements to place the child (and return the child if necessary).

(4) Complete the (100B) form when a decision to place is made. Forward to your ICPC liaison within 10 working days. Note: The receiving state will not provide supervisory services until they have received a completed 100B form that confirms placement.

(5) Request status report of home study or progress reports by submitting memo to your ICPC liaison (in triplicate).
(6) Assume and maintain all financial responsibility, including foster care payments, SSI, social security, or any other benefits paid to the state on behalf of the child. Should a child need to be returned to Kansas due to disruption, the provider makes all travel arrangements and assumes all costs.

A relative may request foster care payments from the sending state, or the receiving state may determine that foster payments are required in order to approve placement. (Foster care payments should always be offered to the family when they are being considered as a placement resource.)

Relative families may apply for temporary assistance to families in their state of residence, but may not always be approved.

Adoption Cases:

(1) When a child is placed for adoption in another state, SRS is responsible for paying adoption subsidy, if child meets the eligibility criteria of Kansas.

(2) SRS determines eligibility and amount of payment

(3) Once Adoptive Placement and Adoption Assistance Agreements are signed, initiate the Interstate Compact on Adoption and Medical Assistance process (ICAMA). Please refer to CFS Policy Manual, Section 9600.

Note: Neither the CW/CBS Provider nor local SRS staff are to contact the Compact Administrator in the Receiving State.

Kansas Compact staff will initiate inquiries to the other state’s Compact Administrator.
The Referral Process

Section 9
The Referral Process

Home study referrals and supervision requests for Kansas children will be forwarded to:

Kansas ICPC Office
Docking State Office Building
915 S. W. Harrison St., 5th Floor
Topeka, Kansas 66612

Referrals for Placement from Kansas to Other States

Referrals of children in SRS custody served by foster care or adoption provider, shall be completed by the provider and forwarded to the Kansas ICPC office.

Referrals for children that SRS is providing direct services to shall be completed by SRS staff.
The Referral Packet

A comprehensive referral packet is required. The more complete the information is, the better the receiving state is able to assess the perspective placement family’s ability to meet the needs of the specific child(ren). Likewise, this information will aid the family in making an informed decision regarding their ability to care for the child.

ICPC referrals may be submitted on multiple placement resources for the same child at the same time. (See page 34 for example.)

A. The referral packet for parent, relative and foster care placements must include the following, in triplicate:

1. Five (5) copies of the ICPC 100A (CFS-4013) Interstate Compact Placement request form. (This is a six page form; last page to be retained by the sending agency for their file.) See completed example on page 35.

2. A cover letter explaining the child(ren)’s situation and reasons why you are requesting out-of-state placement. The cover letter should explain any special needs or specific issues you would like addressed with the family. (Identify all children of a sibling group on one cover letter; separate letters not required.)

3. Journal Entry/Court Order signed by the judge granting custody to SRS. (If these documents are not signed, they will be returned back to the provider for Judge’s signature.)

4. Social history to include child’s current functioning, special needs, the reason the child entered SRS custody and as much information on the birth parents and siblings as possible.
(5) Case plans, the initial and most current

(6) CFS-4018 Financial/Medical plan form must be completed by SRS worker or may be completed by the provider with the assistance of the SRS worker.

(7) Copy of child’s birth certificate

(8) Copy of child’s social security card

(9) If available, include child’s medical history, including immunization records, psychological reports, and school records.

B. **Referrals for public adoptions must include the documentation required above and the following:**

(10) Voluntary relinquishment by birth parents or journal entries terminating parental rights signed by the Judge.

(11) Background information, YA 2300 Part I, II, and III forms should be completed by the birth parents. If birth parents are unavailable, the contractor may complete and sign these forms or send an affidavit explaining that birth parents were unavailable to complete forms.


**Note:** If a pre-approved adoptive family is moving out-of-state, include the previous adoptive home study to your referral.
ICPC CHECK LIST

Parent, Relative, Foster Home, Adoption, Group Home, Residential

100A FORM (CFS 4013)                      Mail Referrals To:
This form has 6 copies, You retain the last copy and Kansas ICPC
forward all others to Kansas ICPC with your referral. Separate
form is required for each child. Docking State Office Bldg, 5th Floor
Separate form is required for each child.
Topeka, Kansas  66612

Three (3) copies of the following correspondence is required when submitting a referral:
(See instructions Compiling ICPC Referrals, on page 34)

☐ COVER LETTER  (Briefly explain the situation regarding the child, why request for home study is
being submitted and note any special concerns you want specifically addressed)

☐ CHILD SOCIAL HISTORY  (Complete a social history for each child, which can be combined onto
one page. Include: why child came into custody, list any special needs, children’s medications, and
need for any special services)

☐ COURT ORDER OR JOURNAL ENTRY  (Must be signed by judge, indicating custody and dated
within the year. If court order showing SRS custody is older than a year, attach current order showing
previous orders are still in effect.)

☐ CASE PLAN  (Include initial case plan and most recent)

☐ FINANCIAL/MEDICAL PLAN CFS-4018  (Title IV-E eligibility to be verified by SRS)

☐ MEDICAL/PSYCHOLOGICAL/SCHOOL REPORTS  (If available)

☐ BIRTH CERTIFICATE/SOCIAL SECURITY CARD

STATE WARD ADOPTION REFERRAL

The following is to be included with documentation above when request is for adoption:

☐ TERMINATION OF PARENTAL RIGHTS  (Include signed court order showing parental rights
have been terminated and custody placed with SRS. If parents relinquish to SRS, attach voluntary
relinquishment and signed court order showing custody with SRS)

☐ MEDICAL AND GENETIC INFORMATION  (Include YA-2300 Forms I, II, III ) These forms
are used to provide a history of medical information on biological parents, extended family and on each
child.

☐ ICWA STATEMENT  (Include a statement of compliance with Indian Child Welfare Act. If it is
determined that child has Indian heritage, include letters sent to the tribes for notification.)
Compiling ICPC Referrals

When submitting referrals, Kansas ICPC requires 5 copies of the completed 100A and triplicate copies of all supporting documentation. When submitting referrals for sibling groups, the referral should contain three separate packets; each packet containing one copy of documentation on all children in sibling group.

Example: Submitting a referral for Susie, Todd and Mary (3 children)

Documents Required per Check list on Page 33

- 100A Form (CFS-4013) (one for each child)
- Cover Letter (list all 3 children on one, we don’t need separate Letters for each)
- Court Order showing SRS Custody (if all 3 children are identified on one court that shows SRS custody, you will only need to include that one order. If not, include a separate order for each child.)
- Social History (You may include all children into one social history or you can provide a separate document on each.)
- Case Plan (These are usually case specific, therefore include a case plan for each child)
- Financial/Medical Plan (CFS -4018) (child specific)
- Medical/School Records (if available/child specific)
- Birth Certificate/Social Security Card

You now have completed all the documents you need for your sibling group. Combine all those documents into one (1) pile. Take that pile of documents to your copier and make 2 copies. You now have the 3 copies needed to complete your referral. Attach your 100A’s to your 3 copies of documents and forward to your ICPC liaison.
INTERSTATE COMPACT PLACEMENT REQUEST

TO: SMITH, CHARLES
NAME OF CHILD
SEX M
DATE OF BIRTH 1/12/99
ETNIC GROUP WHITE
NAME OF MOTHER HELEN SMITH
NAME OF FATHER DANIEL SMITH
NAME OF AGENCY / PERSON RESPONSIBLE FOR PLANNING FOR CHILD (CONTRACTOR, COURT, PARENT, SRS)
HOPE VALLEY CENTER (ANN PEABODY)
TELEPHONE NUMBER 785-222-0000 X 212
STREET ADDRESS 400 WASHINGTON ST
CITY TOPEKA
STATE KS
ZIP CODE 66600
NAME OF AGENCY OR PERSON FINANCIALLY RESPONSIBLE SAME AS ABOVE
STREET ADDRESS
CITY
STATE
ZIP CODE
SECTION II - PLACEMENT INFORMATION
NAME OF PERSON(S) OR FACILITY CHILD IS TO BE PLACED WITH PAM SMITH
STREET ADDRESS 12 CHESTER STREET
CITY PONCA CITY
STATE OK
ZIP CODE 66600
TYPE OF CARE:
☐ Parent X Relative (Relationship) MATERNAL AUNT
☐ Foster Home
☐ Institutional Care (Article VI)
☐ Group Home
☐ Child Caring Institution
☐ Residential
☐ Other:
TITLE IV-E
☐ ADOPTION
☒ YES To Be Finalized In:
☐ SENDING STATE
☒ RECEIVING STATE
LEGAL STATUS:
☐ Sending Agency Custody/Guardianship
☐ Parental Rights Severed- Right to Place For Adoption
☐ Parent Custody/ Relative Custody or Guardianship
☐ Unaccompanied Refugee minor
☐ Court Jurisdiction Case Only
☒ Other
☐ SRS CUSTODY/ HVC FINANCIALLY RESPONSIBLE
SECTION III - SERVICES REQUESTED
INITIAL REPORT (if applicable)
☐ Parent Home Study
X Relative Home Study
☐ Adoptive Home Study
☐ Foster Home Study
SUPERVISORY SERVICES:
☑ Requesting Receiving State to Arrange Supervision
☐ Another Agency Agreed to Supervise
☐ Sending Agency to Supervise
SUPERVISORY REPORTS
☒ Quarterly
☐ Semi-Annually
☐ Annually
☐ Upon Request
☐ Other
NAME AND ADDRESS OF SUPERVISING AGENCY IN RECEIVING STATE
SOCIAL SERVICES/ OKLAHOMA
ENCLOSURES:
☐ Child’s Social History
☐ Home Study of Placement Resource
☐ Court Order/Journal Entry
☐ Other
SIGNATURE OF SENDING AGENCY OR PERSON
(Provider ICPC Liaison Signs Here)
DATE SIGNED
SIGNATURE OF SENDING STATE COMPACT ADMINISTRATOR OR ALTERNATE
DATE SIGNED
SECTION IV - ACTION BY RECEIVING STATE
☐ Placement May Be Made ☑ Placement Shall Not Be Made
COMMENTS
SIGNATURE OF RECEIVING STATE COMPACT ADMINISTRATOR OR ALTERNATE
DATE SIGNED

DISTRIBUTION

Complete 1 set of forms (6 copies) on each child
Sending Agency retains 1 copy (last page) and forwards 5 copies
Sending Compact Administrator retains 1 copy and forwards 4 copies to Receiving Compact Administrator or Alternate
Receiving Agency Compact Administrator indicates action (Section IV) and forwards 1 copy to receiving agency and 2 copies to sending Compact Administrator within 30 days.
Sending Compact Administrator retains 1 completed copy and forwards the other completed copy to Sending Agency

This form supersedes Form CY-2866 9/85
FINANCIAL PLAN

The form 100A is requesting a RELATIVE home study. (check all that apply)

- X Placement resource is financially able and willing to support this child.
- X May receive foster care payments from Kansas if requested or if receiving state determines family will require FC funds. Family must be approved for placement and become licensed in their state. Kansas would pay receiving state rates.

- Child is Title IV-E eligible. Receiving state will arrange for Medicaid coverage based upon eligibility.
- Child is eligible for SSI and resource will be made payee for benefits.

Child is not Title IV-E eligible. Resource may apply for Temporary Assistance for Needy Families (TANF).

If receiving state is not reciprocal, Kansas remains financially responsible.

The form 100A is requesting a FOSTER home study. Resource is: (check all that apply)

- Entitled to receive foster care payments from Kansas when licensed or certified in their state. Kansas would pay the receiving state rate.
- Entitled to Child’s SSI benefits. Resource will become payee when child is placed.

The form 100A is requesting a PARENT home study. The parent is expected to: (check all that apply)

- Support this child.
- Apply for welfare assistance in the receiving state if unable to support this child.

The form 100A is requesting an ADOPTIVE home study. Placement resource is: (check all that apply)

- Expected to support child.
- Maybe entitled to an adoption assistant payment which will be determined before child is placed.
- Expected to apply for assistance in the receiving state if they are unable to support child.

MEDICAL PLAN (check all that apply)

- X Child is Title IV-E eligible and eligible under COBRA to receive medical card in receiving state.
- Child is eligible for medical card in the receiving state under TANF child-only grant/benefits.
- Child is not Title IV-E eligible and resides in substitute care. If resource is unable to receive medical coverage in the receiving state, Kansas will issue a Kansas medical card.
- Child is Medicaid eligible as a recipient of SSI.
- Placement resource agrees to meet the medical needs of the child without financial assistance from KS.
- Placement is with Parent & he/she is financially responsible for meeting the medical needs of this child.
- Child is eligible to receive a medical card through ICAMA once adoption assistance is in place.

Kansas remains responsible for the financial and medical needs of a child who is under Kansas jurisdiction and in the custody of the Secretary of Kansas SRS. In the event of a placement disruption, Kansas is financially responsible for the return of the child as long as Kansas retains jurisdiction. I HEREBY VERIFY THAT THIS PLAN AND ALL AVAILABLE OPTIONS HAVE BEEN DISCUSSED WITH AND AGREED TO BY THE PROSPECTIVE CARE GIVER(S)

Verified by Social Service Worker                  Office Phone number

DISTRIBUTION: Send 3 copies to the Kansas ICPC office and retain pink copy for your file.
**INTERSTATE COMPACT REPORT ON CHILD’S PLACEMENT STATUS**

<table>
<thead>
<tr>
<th>To: (ICPC Administrator in Receiving State)</th>
<th>FROM: (ICPC Administrator in Sending State)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Name:</strong> OKLAHOMA ICPC</td>
<td><strong>Name:</strong> KANSAS ICPC</td>
</tr>
<tr>
<td><strong>State:</strong></td>
<td><strong>State:</strong></td>
</tr>
</tbody>
</table>

A. **NAME OF CHILD**  
SMITH, CHARLES

B. **BIRTH DATE OF CHILD**  
1/12/99

C. **NAME OF MOTHER**  
HELEN SMITH

D. **NAME OF FATHER**  
DANIEL SMITH

E. **PLACEMENT OF CHILD WITH:**

<table>
<thead>
<tr>
<th><strong>NAME:</strong> PAM SMITH</th>
<th><strong>DATE PLACED:</strong> 2/05/07</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Address:</strong> 12 CHESTER STREET</td>
<td><strong>TYPE:</strong> [ ] Parent [X] Relative [ ] Adoption</td>
</tr>
<tr>
<td></td>
<td>[ ] Foster Home [ ] Other</td>
</tr>
<tr>
<td><strong>Address:</strong> PONCA CITY, OK 66600</td>
<td></td>
</tr>
</tbody>
</table>

F. **PLACEMENT CHANGES**

- [ ] Discharged From Placement
- [ ] Change of Address While In Receiving State
- [ ] Other

<table>
<thead>
<tr>
<th><strong>Name:</strong></th>
<th><strong>Address:</strong></th>
</tr>
</thead>
</table>

G. **COMPACT TERMINATION**

<table>
<thead>
<tr>
<th><strong>Reasons:</strong></th>
<th><strong>Date of Termination:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Child Returned to Sending State</td>
<td>[ ] Child Reached Majority/Emancipated</td>
</tr>
<tr>
<td>[ ] Withdrawing Placement Request</td>
<td>[ ] Approved Resource Will Not Be Used</td>
</tr>
<tr>
<td>[ ] Sending State’s Jurisdiction Terminated</td>
<td>[ ] Treatment Completed</td>
</tr>
<tr>
<td>[ ] Legal Custody and/or Guardianship Awarded and/or Returned To: (see below)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>NAME:</strong></th>
<th><strong>RELATIONSHIP:</strong></th>
</tr>
</thead>
</table>

**ADOPTION FINALIZED IN:**

- [ ] IN RECEIVING STATE
- [ ] IN SENDING STATE

<table>
<thead>
<tr>
<th><strong>DATE:</strong></th>
</tr>
</thead>
</table>

**Signature of Person/Agency Supplying This Information**  
(Provider ICPC Liaison Signs Here)

<table>
<thead>
<tr>
<th><strong>Date:</strong></th>
</tr>
</thead>
</table>

**Signature of Compact Administrator or Alternate**

<table>
<thead>
<tr>
<th><strong>Date:</strong></th>
</tr>
</thead>
</table>

Sending Person/Agency Retains LAST Copy (1)  
Forward Other Three (3) Copies On to Your ICPC Office  
(This form supersedes CY-2867, 5-93 and YA-3305, 5-95)
Can We Speed Up Home Study Process? (Priority Regulation 7)

SECTION 10
Can we speed up the ICPC home study process?

Regulation 7 Priority Request

Regulation 7 establishes procedures for priority out-of-state placements of children. This speeds up the home study process and reduces the time the receiving state has to complete a study. ICPC dictates that a home study must be completed within 60 calendar days. When utilizing Regulation 7, the home study must be completed within 20 working days.

To establish a Priority Placement Request, the court, upon request, or on its own motion, determines that a proposed priority placement of a child from one state to another is required and child meets, following criteria:

The court order is not valid unless it contains a specific finding that the following circumstances apply AND sets the facts on which the court based its finding.

To request a Regulation 7 priority home study, the proposed placement resource must be one of the following (1st Degree of Relationship):

- Parent
- Grandparent
- Adult Brother
- Adult Sister
- Aunt
- Uncle

In addition, one of the following criteria must be met:

1) The child is less than two years of age; or

2) The child is in an emergency shelter; or

3) The child has spent a substantial amount of time in the home of the proposed placement recipient. (It must be documented in the court order how the Judge reached this determination.)
   Or

4) If you have already submitted a home study request through ICPC and the receiving state has not submitted the completed home study within the allowed time (60 calendar days), the court may be petitioned to sign a Regulation 7 court order based upon the fact that the receiving state has not complied with ICPC time lines.
• Once Judge has signed the court order, your ICPC liaison will fax a copy to the KS ICPC Office, who will fax to the receiving state ICPC Office.

• Please have your ICPC liaison confirm time lines have not been met before asking the Judge to sign a Regulation 7 court order.

**How Did Regulation 7 Get its Name and What are the Time Frames once Court has issued the Order?**

From the beginning to end, this process must not take longer than 7 days:

<table>
<thead>
<tr>
<th>Timeframe</th>
<th>Duration</th>
<th>What Needs to Be Done</th>
</tr>
</thead>
<tbody>
<tr>
<td>Court</td>
<td>2 Days</td>
<td>To sign from date of court order</td>
</tr>
<tr>
<td>Sending Agency</td>
<td>3 Days</td>
<td>To complete the referral and forward to ICPC office</td>
</tr>
<tr>
<td>ICPC Office</td>
<td>2 Days</td>
<td>To forward to Receiving State</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>7 Days</td>
<td></td>
</tr>
</tbody>
</table>
In the Interest of DOB: Case #

ICPC REGULATION 7 PRIORITY - FINDINGS & ORDERS

On this ______ day of ________________, 200_

1) The child(ren) are under the jurisdiction of this court.
2) The home of ____________________________ is available to this child for placement.
   (Name or relative marked below)

3) The placement recipient must ______ Parent ______ Grandparent ______ Aunt
   be one of the following: ______ Uncle ______ Sister ______ Brother

4) The proposed placement resource is a relative described above, and meets the requirements as the
   recipient to receive a child through ICPC. Child qualifies for priority placement under Regulation 7 as
   indicated below:

   Please mark the appropriate box below, verifying one criteria has been met:

   ☐ a. Child is under the age of two.
   ☐ b. Child is in an emergency shelter.
   ☐ c. The child has spent a substantial amount of time in the home of the proposed
      placement recipient. Judge must explain: ________________________________

   ☐ d. It has been over 60 calendar days since the receiving state accepted our home
      study request. The Kansas ICPC office has not yet received a home study; therefore, the receiving state is out of compliance with the Safe and Timely Act.

5) IT IS THEREFORE ORDERED THAT A PRIORITY HOME STUDY BE COMPLETED

6) The Presiding Judge has 2 working days from the date listed above, to sign and forward this order
   to the sending agency. The sending agency shall have 3 working days to compile the referral and
   forward to the Kansas ICPC office. The Kansas ICPC office will have 2 working days to review,
   sign and forward request to the receiving state compact administrator.

   Requires Judge’s Signature
   Full Name of Judge Printed Here
ASSOCIATION OF ADMINISTRATORS OF THE INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN

ICPC-101
August 1996

SENDING STATE
PRIORITY HOME STUDY REQUEST

To be submitted by Social Worker with other required ICPC materials

Name of Child¹ to be placed ___________________________ Age _____ Mother’s Name ___________________________

Ethnic Group ___________________________ DOB ___________ Father’s Name ___________________________

PROPOSED CARETAKER

NAME: ___________________________ Marital Status: S M Sep. D W Living with ___________________________

ADDRESS: ____________________________________________ (circle one) (name of person)

Telephone Home #: ____________________ Work #: ____________________ Social Security # ____________________

Relationship to child identified above: ____________________________

Best time of day to contact caretaker: _______________ Employer ____________________ (if applicable)

Alternate Contact Name & Address: ____________________________

ASSESSMENT OF CHILD

Case Plan Attached: yes no Financial/ Medical Plan attached: yes no

(circle one) (circle one)

Special Needs: __________________________________________

Handicaps: Mental/Physical __________________________________

_______________________________________________________

Service Needs/Treatment Requirements: __________________________

_______________________________________________________

School Information: ________________________________________

_______________________________________________________

Other required pertinent information regarding child and family will follow: yes no

(circle one)

Worker’s Name ___________________________ (please print) (Tel. #)

Worker’s Signature ___________________________ (date)

Supervisor’s Signature ___________________________ (if required) (date) (Tel. #)

¹ If there is more than one child to be placed with the proposed caretaker, list the names of the child(ren) and all requested information on
a separate page and attach to this form.
Procedures for Regulation 7

The sending state shall determine if the case meets the criteria for Regulation 7. The same procedures and documentation are required, that are required for all other ICPC referrals.

The social worker completing the referral for the sending agency shall:

- Note in the cover letter accompanying the ICPC referral that it is a Regulation 7 referral;
- Explain the conditions which require a priority placement;
- Send three (3) copies of the court order ordering a priority placement under Regulation 7 (See example of court order on page 41).
- Complete the ICPC 101 Sending State Placement Request for Referral and route to the Kansas ICPC Compact Administrator. (See blank form on page 42.)

NOTE: Attach all documents listed above to your new referral.

If a Regulation 7 court order is completed after the ICPC referral has been forwarded to the receiving state, submit one copy of the documents, listed above, to your ICPC liaison who will fax to the KS ICPC Specialist.

Failure of Receiving State to Comply with a Regulation 7 Request

If the receiving state compact office fails to complete actions in the established time frames, the court which issued the court order, may inform the appropriate court in the receiving state, provide them with the relevant documentation and request their assistance. Within its jurisdiction and authority in the receiving state, the court may render such assistance and issue appropriate orders requiring compliance to Regulation 7.
SRS Responsibilities
As Receiving State

SECTION 11
SRS is responsible for providing services for children who are wards of the court or the state public welfare agency in other states. All requests for services are routed by the sending state’s compact administrator to the Kansas compact administrator. The Kansas compact administrator approves or denies all placements coming into Kansas.

Services requested by private agencies or private individuals, e.g., independent adoption brokers, shall be purchased by the sending agent from Kansas licensed child placing agencies. Family assessments may be purchased from clinical social workers with masters degree, licensed in Kansas by the Behavioral Science Regulatory Board (social workers or agencies not licensed in Kansas cannot provide services in Kansas).

**Kansas ICPC Office forwards:**

- Requests for home studies to the regional Intake office, who forwards to the appropriate supervisor for assignment.

- Assigned social worker will complete home studies using the Kansas ICPC Home Study Guideline (See page 48-50.) NOTE: All home studies sent to KS ICPC must be in triplicate!

**If you contract out the home study, you are responsible for the following:**

- When home study is received, review for completion (be sure time lines are met)

- Verify the contractor has followed the home study guideline

- Confirm that a clear recommendation for placement has been made

- Complete a cover letter on agency letterhead, and provide your recommendation

- SRS worker and supervisor’s signatures are required. (Typed signatures will be accepted if home study is sent to KS ICPC electronically.)

- Assist the family to become licensed foster parents, if required or family requests payments. Applications, for and instructions for
fostercare licensing will be included in the ICPC referral packet. Assessments completed for a foster family may be accepted for anytime which is covered by the foster home license, if the family remains in the same home. If the family moves to another location in the same state, the home needs to be reassessed to assure it meets licensing standards.

• Supervise and provide services for the child and the family once the placement has been approved through the compact and 100B has been received confirming date of placement. Monthly visits are required. Specialized services, which must be purchased, shall be paid for by the sending agency.

• Provide three (3) copies of quarterly progress reports. All reports are to be sent to the Kansas ICPC office for forwarding to the sending state’s ICPC office. (No correspondence is to be sent directly to another state’s ICPC office by contractor or ICPC staff.)

Note: Either Compact Administrators may request additional information before approving or denying the placement. Approval by the receiving state does not assure that the placement will take place. The sending state (state with custody) makes the final placement decision.

Time Frames for Completing ICPC Home Studies

• Family assessment for Parents and Relatives are to be completed within 60 calendar days.

• Family assessments for Foster Care and Adoption are to be completed within 30 calendar days to be eligible for federal incentive
payments. Completion of foster care application is not subject to 30 calendar day timeline.

- Notify the Kansas ICPC Specialist by email if the home assessment cannot be completed by the due date noted on the ICPC form/transmittal. Kansas ICPC will notify the ICPC Office in the sending state regarding the delay.

- Placement approvals are good for 6 months from the date the 100A is signed by the Receiving State’s ICPC Office.

- SRS worker should notify Kansas ICPC, in writing or by email, when home study has expired and placement has not occurred.

**SRS Worker will also collaborate with:**

CW/CBS providers verifying IV-E eligibility on the CFS 4018, Financial/Medical Plan

And

- Notify CFS regional attorney and Kansas ICPC Specialist if a court places without prior ICPC approval

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**Kansas ICPC Home Study Guideline**

**Placement For:** Children’s Name

**Placement Resource:** Name/Address

**Completed by:**

Name of Agency

Address & Telephone

**Referring Worker:** (From Other State)

(Name of Agency)

**Date Completed:**

**Type of Placement Requested:**

**Basis for Home Study:**
Why does Sending State want to consider this family:
- What is the relationship, if any, to the child:
- What is their understanding of the reason the child is in the custody of the other state:
- What special needs do the child(ren) have:
- If relative, are there any limitations placed on contact with parents:

Motivation to care for Specific Child:

Specific Needs of the child:
- Education, Medical, Special Education, Other:
- Describe resources available to meet these needs:

Social History
- Description of all household members:
- List all members of the household, age, sex, relationship to placement resource:
- Describe relationship of current household members:
- Describe how each family member feels about the placement of an additional child in the family: Impact on sharing rooms, parent’s time:
- Describe each child in the family:
- Describe any special needs of household members: therapy, medical, prior relationship with SRS. (If there are medical concerns, obtain a release of information, and request medical records from physician)

Marital Status
- Describe length and stability of relationship:
- If shared living (unmarried) who will have primary child care responsibility:
- Number of marriages:

Parenting Ability:
- Describe parenting experience in general:
- Describe strengths and needs in ability to parent specific child(ren):
- Describe discipline practices:

Support of Extended Family Member/Community:
- To what extent do extended family members support this placement:
- Describe community resources available to assist family meet the child’s needs:

Educational Needs of Child:
- Describe specific needs of child to be placed and available resources:

Child Care Plans:
- Describe child care plans for pre-school children:
- Describe supervision before and after school, if applicable:

Physical Characteristics of the Home:
- Describe the home. (Number of rooms, bedrooms, care/maintenance of home):
- If child to be placed will need to share a room with a child already in the home, are there any
concerns by the parents or the child having to share space:

Employment History:
- Describe employment history of each adult household member:
- Describe basis for job changes, if frequent in nature:

Finances and Monthly Expenses:
- Provide monthly income and budget:
- Can family (household) adequately meet their monthly expenses:

Foster Care Payment:
If sending state has not requested foster care licensure, determine if family needs or desires to receive foster care payments from the sending state. If so, notify your ICPC Consultant ASAP in order that sending state can be advised to submit the new 100A for FC. The family will need to become licensed or approved by KDHE if sending state agrees to send payments to family. **Does not apply to parent placements.**

Does family want FC payments?  ____ YES  ____ NO

Understanding of resources available to assist them care for the child:
- What is their understanding of assistance available from the sending state:
- If a non-parent relative, are they expected to apply for TANF and Medicaid:
- Licensure or approval is required if the sending state plans to make a foster care payment. Does family understand this:  ____ YES  ____ NO

KBI Checks:  **Required for all household members, 10 years and over.**
Have cleared checks been received?  ____ YES  ____ NO
If NO, briefly explain offenses/convictions:

Child Abuse Checks:  **Required for all household members, 10 years of age and over.**
Have cleared checks been received?  ____ YES  ____ NO
If NO, briefly explain reports and/or substantiations:

FBI Fingerprint Checks:  **Required for all adults in household. (Applies only to foster care or adoptive home studies.)**
If required, have cleared checks been received?  ____ YES  ____ NO
If No, briefly explain offenses/convictions:

FOR FOSTER CARE/ADOPTIVE PLACEMENTS:  Due to Adam Walsh legislation, if proposed resource has resided outside of Kansas within the last 5 years, a child abuse and neglect registry check will be required in each state the prospective foster/adoptive parents, and other adult(s) living in the home, have resided in the preceding 5 years.

51
If required, have cleared checks been received? _____ YES _____ NO
If No, briefly explain offenses/convictions:

References: Include three references. Two should be non-relatives, i.e. employer, neighbor, minister, friend.
Have you received all required references? _____ YES _____ NO
If YES, were all positive? _____ YES _____ NO
If NO, explain:

Summary and Recommendation: Provide a strengths/needs summary of the resource family and their ability to parent the referred child. Concerns should be addressed. If you feel resource can parent child with specific services, list those services so the referring state can decide if they want to purchase, if required. A specific recommendation is to be made.

__________________________  _____/_____/______
Social Worker Signature           Date

__________________________  _____/_____/______
Supervisor Signature             Date

The depth of any one of these sections will be determined by the basis for referral and the specific needs of the child and resource family.

For foster care licensure or approval: SRS will need to assist family with forms to be sent to KDHE. Training and preparation of the family will also need to be noted.

Rev. 11/09
Declaration of No Prohibitive Offenses

By signing this document, I declare, to the best of my knowledge, a check of the KBI criminal history database will reveal I have not been convicted of any of the listed crimes, or the conviction for any of these offenses has been expunged. I understand these offenses would prohibit me from being approved to provide relative, foster care or adopting a child. This applies to juvenile as well as adult offenses.

K.S.A. 21-3401 Murder in the First Degree
K.S.A. 21-3402 Murder in the Second Degree
K.S.A. 21-3403 Voluntary Manslaughter
K.S.A. 21-3404 Involuntary Manslaughter
K.S.A. 21-3405 Vehicular Homicide
K.S.A. 21-3406 Assisting Suicide
K.S.A. 21-3408 Assault
K.S.A. 21-3409 Assault of a Law Enforcement Officer
K.S.A. 21-3410 Aggravated Assault
K.S.A. 21-3411 Aggravated Assault of a Law Enforcement Officer
K.S.A. 21-3412 Battery
K.S.A. 21-3413 Battery against a Law Enforcement Officer
K.S.A. 21-3414 Aggravated Battery
K.S.A. 21-3415 Aggravated Battery against a Law Enforcement Officer
K.S.A. 21-3416 Unlawful Interference with a Firefighter
K.S.A. 21-3418 Permitting Dangerous Animal to be at Large
K.S.A. 21-3419 Criminal Threat
K.S.A. 21-3419a Aggravated Criminal Threat
K.S.A. 21-3420 Kidnapping
K.S.A. 21-3421 Aggravated Kidnapping
K.S.A. 21-3422 Interference with Parental Custody
K.S.A. 21-3422a Aggravated Interference with Parental Custody
K.S.A. 21-3423 Interference with Custody of a Committed Person
K.S.A. 21-3424 Criminal Restraint
K.S.A. 21-3425 Mistreatment of a Confined Person
K.S.A. 21-3426 Robbery
K.S.A. 21-3427 Aggravated Robbery
K.S.A. 21-3428 Blackmail
K.S.A. 21-3430 Income Tax Returns; Disclosure of Use for Commercial Purposes Information Obtained in Preparing
K.S.A. 21-3434 Promoting or Permitting Hazing
K.S.A. 21-3435 Exposing Another to a Life Threatening Communicable Disease
K.S.A. 21-3437 Mistreatment of a Dependent Adult
K.S.A. 21-3438 Stalking
K.S.A. 21-3439 Capital Murder
K.S.A. 21-3440 Injury to a Pregnant Woman
Declaration of No Prohibitive Offenses

K.S.A. 21-3441 Injury to a Pregnant Woman by Vehicle
K.S.A. 21-3442 Involuntary Manslaughter While Driving Under the Influence of Alcohol or Drugs
K.S.A. 21-3443 Battery against a School Employee
K.S.A. 21-3442 Rape
K.S.A. 21-3450 Involuntary Manslaughter While Driving Under the Influence of Alcohol or Drugs
K.S.A. 21-3451 Aggravated Indecent Liberties with a Child
K.S.A. 21-3452 Aggravated Indecent Liberties with a Child
K.S.A. 21-3453 Criminal Sodomy
K.S.A. 21-3454 Aggravated Criminal Sodomy
K.S.A. 21-3455 Adultery
K.S.A. 21-3456 Lewd and Lascivious Behavior
K.S.A. 21-3457 Enticement of a Child
K.S.A. 21-3458 Indecent Solicitation of a Child
K.S.A. 21-3459 Aggravated Indecent Solicitation of a Child
K.S.A. 21-3460 Prostitution
K.S.A. 21-3461 Promoting Prostitution
K.S.A. 21-3462 Patronizing a Prostitute
K.S.A. 21-3463 Sexual Exploitation of a Child
K.S.A. 21-3464 Sexual Battery
K.S.A. 21-3465 Aggravated Sexual Battery
K.S.A. 21-3466 Unlawful Sexual Relations
K.S.A. 21-3467 Bigamy
K.S.A. 21-3468 Incest
K.S.A. 21-3469 Aggravated Incest
K.S.A. 21-3470 Abandonment of a Child
K.S.A. 21-3471 Aggravated Abandonment of a Child
K.S.A. 21-3472 Nonsupport of a Child or Spouse
K.S.A. 21-3473 Endangering a Child
K.S.A. 21-3474 Abuse of a Child
K.S.A. 21-3475 Furnishing Alcoholic Liquor to a Minor
K.S.A. 21-3476 Furnishing Cereal Malt Liquor to a Minor
K.S.A. 21-3477 Furnishing Alcoholic Beverages to a Minor for Illicit Purposes
K.S.A. 21-3478 Aggravated Juvenile Delinquency
K.S.A. 21-3479 Contributing to a Child’s Misconduct or Deprivation
K.S.A. 21-3480 Promoting Obscenity
K.S.A. 21-3481 Promoting Obscenity to Minors

Any felony of a crime of K.S.A. 65-4101 through K.S.A. 65-4175—prohibited drug crimes
The Ten Articles of ICPC

SECTION 12
The Articles of the Compact

The Articles of the Compact on Children are found in K.S. A. 38-1201 et. seq. Legislative findings and policy articulate the following as the basis for the compact.

A. That finding suitable homes for children who have lost or never had them requires the full attention and resources of the state;

B. That the needs of children and of adults cannot be met by restricting child placement services to the state of Kansas;

C. That would be parents and children have need for love and security and fulfillment that can be met only when children in need of placement are matched with adults who can care for them;

D. A variety of circumstances makes interstate placement of children essential and offers compelling reasons or an interstate compact and human rights and obligations can be protected.
ARTICLE I. Purpose and Policy

It is the purpose and policy of the party states to cooperate with each other in the interstate placement of children to the end that:

A. Each child requiring placement shall receive the maximum opportunity to be placed in a suitable environment and with persons or institutions having appropriate qualifications and facilities to provide a necessary desirable degree and type of care.

B. The appropriate authorities in a state where a child is to be placed may have full opportunity to ascertain the circumstances of the proposed placement, thereby promoting full compliance with applicable requirements for the protection of the child.

C. The proper authorities of the state from which the placement is made may obtain the most complete information on the basis of which to evaluate a projected placement before it is made.

D. Appropriate jurisdictional arrangements for the care of children will be promoted.
ARTICLE II. Definitions

As used in this compact:

(1) "Child" means a person who, by reason of minority, is legally subject to parental, guardianship or similar control.

(2) "Sending Agency" (party) means a party state, officer or employee thereof; a subdivision of a party state, or officer or employee thereof; a court of a party state; a person, corporation, association, charitable agency or other entity which sends, brings or causes to be sent or brought any child to another party state.

(3) "Receiving State" means the state to which a child is sent, brought, or caused to be sent or brought, whether by public authorities or private persons or agencies, and whether for placement with state or local public authorities or for placement with private agencies or persons.

(4) "Placement" means the arrangement for the care of a child in a family free or boarding home or in a child-caring agency or institution but does not include any institution caring for the mentally ill, mentally defective or epileptic or any institutions primarily educational in character, and any hospital or other medical facility.

Definition of "Family Free or Boarding Home":

"Family Free or Boarding Home" was the term used by the social work profession at the time the Compact was drafted.

A "family free home" is one in which the placement recipient does not receive payment for taking or keeping the child, i.e. parents or relatives.

A "boarding home" is a home (family or institutional) that requires or accepts payments for taking and caring a child.

The compact applies to interstate placement, whether or not payment is involved in making or maintaining the placement.
ARTICLE III. Conditions for Placement

A. No sending agency (party) shall send, bring or cause to be sent or brought into any other party state any child for placement in foster care or as a preliminary to a possible adoption unless the sending agency shall comply with each and every requirement set forth in this article and with the applicable laws of the receiving state governing the placement of children therein.

B. Prior to sending, bringing or causing any child to be sent or brought into a receiving state for placement in foster care or as a preliminary to a possible adoption, the sending agency (party) shall furnish the appropriate public authorities in the receiving state written notice of the intention to send, bring, or place the child in the receiving state. The notice shall contain:

1. The name, date and place of birth of the child.
2. The identity and address or addresses of the parents or legal guardian.
3. The name and address of the person, agency or institution to or with which the sending agency proposes to send, bring, or place the child.
4. A full statement of the reasons for such proposed action and evidence of the authority pursuant to which the placement is proposed to be made.

C. Any public officer or agency in a receiving state which is in receipt of a notice pursuant to paragraph (b) of this article may request of the sending agency, or any other appropriate officer or agency of or in the sending agency’s state, and shall be entitled to receive from them, such supporting or additional information as it may deem necessary under the circumstances to carry out the purpose and policy of this compact.

D. The child shall not be sent, brought, or caused to be sent or brought into the receiving state until the appropriate public authorities in the receiving state shall notify the sending agency, in writing, to the effect that the proposed placement does not appear to be contrary to the interests of the child.

ARTICLE IV. Penalty for Illegal Placement
The sending, bringing, or causing to be sent or brought into any receiving state of a child in violation of the laws respecting the placement of children of both the state in which the sending agency is located or from which it sends or brings the child and of the receiving state. Such violation may be punished or subjected to penalty in either jurisdiction in accordance with its laws. In addition to liability for any such punishment or penalty, any such violation shall constitute full and sufficient ground for the suspension or revocation of any license, permit, or other legal authorization held by the sending agency which empowers or allows it to place, or care for children.

KSA 38-1206. "Enforcement of compact; duties of state departments, agencies and officers; failure to comply with provisions of compact by any professional, penalty. The courts, departments, agencies and officers of this state and its subdivisions shall enforce this compact and shall do all things appropriate to the effectuation of its purposes and intent which may be within their respective jurisdictions. Failure to comply with the provisions of the interstate compact on the placement of children by any professional providing services related to the placement of children is a class C misdemeanor. For the purposes of this section, "professional" means any person who receives payment or compensation for providing services related to the placement of children for adoption."
ARTICLE V. Retention of Jurisdiction

A. The sending agency shall retain jurisdiction over the child sufficient to determine all matters in relation to the custody, supervision, care, treatment and disposition of the child which it would have had if the child had remained in the sending agency’s state, until the child is adopted (permanency achieved), reached majority, becomes self-supporting or is discharged with the concurrence of the appropriate authority in the receiving state. The sending agency shall continue to have financial responsibility for support and maintenance of the child during the period of the placement. Nothing contained herein shall defeat a claim of jurisdiction by a receiving state sufficient to deal with an act of delinquency or crime committed therein.

B. When the sending agency is a public agency, it may enter into an agreement with an authorized public or private agency in the receiving state providing for the performance of one or more services in respect of such case by the latter as agency for the sending agency.

C. Nothing in this compact shall be construed to prevent a private charitable agency authorized to place children in the receiving state from performing services or acting as agent in that state for a private charitable agency of the sending state; nor to prevent the agency in the receiving state from discharging financial responsibility for the support and maintenance of a child who has been placed on behalf of the sending agency without relieving the responsibility set forth in paragraph (a) hereof.
A practice that is unfortunately widespread is for a court to make an interstate placement, approve the placement or direct another entity such as a public welfare agency to make it, and then unilaterally dismisses its jurisdiction. Such dismissals are unlawful because Article V(a) of the ICPC sets for the only circumstances under which termination of the interstate placement status is to occur. The circumstance relevant here, which is expressly enumerated in Article V(a), is concurrence of the receiving state.

Sometimes the court does not inquire of the receiving state Compact Administrator whether concurrence in termination of the interstate placement status is acceptable. Sometimes there is a disagreement as to whether dismissal by the court in the sending state is appropriate. The propriety of dismissal of jurisdiction with its resultant termination of the interstate placement status is not susceptible to measurement by a mechanical yardstick. Elements of professional evaluation and judgment are involved and there is often room for reasonable differences of opinion. In enacting the ICPC, the states purposely required concurrence of the sending agency and the receiving state. They did so in order to impose a greater degree of caution and care in ending state responsibility and supervision in order to provide great protection for the child. The states also agree to the necessity for concurrence to protect receiving states from having children “dumped” on them.

**Secretariat Opinion**

**Why Court Must Retain Jurisdiction in ICPC**

When Jurisdiction can be Dismissed or Terminated

When hearing ICPC cases, judges can become frustrated with the additional time that may be required before case termination is acceptable to the receiving state. Judges must resist the practice of illegally closing or dismissing ICPC cases before all requirements of the Compact are met. Instead, they must actively seek to expedite the ICPC process while staying within Compact law.

A memorandum prepared by the Secretariat to the AAICPC in November 1996 addresses the issue of inappropriate case dismissal. It states:

**Retention of Jurisdiction**

Article V of the Compact speaks to the issue of retention of jurisdiction. It states: The sending agency shall retain jurisdiction over the child sufficient to determine all matters in relation to the custody, supervision, care, and disposition of the
child which it would have had if the child had remained in the sending agency’s state, until the child is adopted, reaches majority, becomes self-supporting, or is discharged with the concurrence of the appropriate authority in the receiving state.

Such jurisdiction shall also include the power to effect or cause the return of the child or his or her transfer to another location and custody pursuant to law. The sending agency shall continue to have financial responsibility for support and maintenance of the child during the period of the placement. Nothing contained herein shall defeat a claim of jurisdiction by a receiving state sufficient to deal with an act of delinquency or crime committed therein.

Key language in this article requires that jurisdiction be retained until: 1) the child is adopted; 2) reaches majority; 3) becomes self-supporting; or 4) is discharged with the concurrence of the appropriate authority in the receiving state.

Post placement supervision by an appropriate agency or person in the receiving state is required until one of these events occurs. In the case of the final option - concurrence of the receiving state – post-placement supervision is required for a period of time sufficient to determine that the placement is stable and that the child is receiving appropriate care. The generally accepted time frame for this determination is generally 6 months, depending on specific circumstances and the complexity of the child’s needs.
ARTICLE VI. Institutional Care of Delinquent Children

A child adjudicated delinquent may be placed in an institution in another party jurisdiction pursuant to this compact but no such placement shall be made unless the child is given a court hearing on notice to the parent or guardian with opportunity to be heard, prior to his being sent to such other party jurisdiction for institutional care and the court finds that:

(1) Equivalent facilities for the child are not available in the sending agency’s jurisdiction; and

(2) Institutional care in the other jurisdiction is in the best interest of the child and will not produce undue hardship.
ARTICLE VII. Compact Administrators

The executive head of each jurisdiction party to this compact shall designate an officer who shall be general coordinator of activities under this compact in his jurisdiction and who, acting jointly with like officers of other party jurisdictions, shall have power to promulgate rules and regulations to carry out more effectively the terms and provisions of this compact.
ARTICLE VIII. Limitations

This compact shall not apply to:

(2) The sending or bringing of a child into a receiving state by his parent, step-parent, grandparent, adult brother or sister, adult uncles or aunt or his guardian and leaving the child with any such relative or non-agency guardian in the receiving state.

(3) Any placement, sending or bringing of a child into a receiving state pursuant to any other interstate compact to which both the state from which the child is sent or brought and the receiving state are party, or to any other agreement between said states which has the force of law.

Note: (a) applies only when the ‘specified parties’ rights have not been terminated, suspended, or limited by a court. The Kansas ‘party’ takes a child to a ‘specified party’ in the receiving state. It does not apply to a ‘specified party’ coming to Kansas and taking the child home with them. Two parties must be involved.
Article VIII Has Been and Continues to be Misinterpreted by Courts and Legal Representatives

Secretariat Opinion to the Association of Administrators Interstate Compact on the Placement of Children, has submitted the following clarification as to why placements with parents are Not excluded in Article VIII:

When a parent has custody of a child in the normal way (status conferred by childbirth or adoption), and no court has become involved, meaning no jurisdiction has been taken over the child, the condition of placement is not one that is considered foster care and Article VIII would apply. Therefore, parents have the right to place their child or children with relatives in other states without ICPC involvement.

However, when a court takes jurisdiction over a child, the court assumes the authority/responsibility to plan for the child.

Therefore, the parent/relative no longer has legal custody and Article VIII does not apply. When a child is with a parent/relative under these circumstances, the child is considered to be in foster care; therefore, would be subject to 38-1202 Article I of the Interstate Compact on the Placement of Compact.
ARTICLE IX. Enactment and Withdrawal

This compact shall be open to joinder by any state, territory or possession of the United States, the District of Columbia, the Commonwealth of Puerto Rico, and, with the consent of Congress, the Government of Canada or any province thereof. It shall become effective with respect to any such jurisdiction when such jurisdiction has enacted the same into law. Withdrawal from this compact shall be by the enactment of a statute repealing the same, but shall not take effect until two years after the effective date of such statute, and until written notice of the withdrawal has been given by the withdrawing state to the Governor of each other party jurisdiction. Withdrawal of a party state shall not affect the rights, duties and obligations under this compact of any sending agency therein with respect to a placement made prior to the effective date of withdrawal.
ARTICLE X. Construction and Severability

The provisions of this compact shall be liberally construed to effectuate the purposes thereof. The provisions of this compact shall be severable and if any phrase, clause, sentence or provision of this compact is declared to be contrary to the constitution of any party state or of the United States or the applicability thereof to any government, agency, person or circumstances is held invalid, the validity of the remainder of this compact and the applicability thereof to any government, agency person or circumstance shall not be affected thereby. If this compact shall be held contrary to the constitution of any state party thereto, the compact shall remain in full force and effect as to the remaining states and in full force and effect as to the state affected as to all severable matters.
The 10 Regulations of ICPC

SECTION 13
Regulation 1 - Conversion of Intrastate Placement into Interstate Placement

(1) The term “placement” as used in the Compact is not limited to a placement having an interstate incidence when originally made.

The applies to those situations in which a child residing in a foster home moves with their family to another state or a child placed for adoption interstate moves with their family prior to the finalization of the adoption.

(2) For the placement initially intrastate, the investigation pursuant to Article III shall only be for the purpose of determining whether any special needs which the child may have cannot reasonably be met in the community or area where the interstate placement is to be made. Nothing prevents the receiving state from monitoring the placement and notifying the sending agency of any change in circumstances and conditions of the placement which affect or may affect its suitability.

(3) A person or agency making the placement should inform the person or persons with whom the placement is made that moving to another state will convert the placement to an interstate placement and the Compact will apply.

Regulation 2 - Repealed (April 1999)

This regulation clarifies the responsibilities of Programs of public or private agencies in which children are placed in family homes as an incident to their attendance at schools in communities in other state or foster care placements within the meaning of the compact. The homes provide child care and supervision during the time when the child is not in attendance in school. These homes do not fall within the educational exception in Article II (d).

The regulation further clarifies the responsibilities and procedures related to licensure and interaction with the Compact.
**Regulation 3 - Placements with Parents, Relatives, Non-agency Guardians and Non-family Settings**

This regulation further clarifies the following:

A. “Placement” as defined in Article II(d) included the arrangement for the care in the home of their parent, other relative, or non-agency guardian in a receiving state when the sending agency in an entity other than a parent, relative, or non-agency guardian making the arrangements for case as a plan exempt under Article VIII(a) of the compact.

B. “Conditions for placement” apply to any placement as defined in Article II(d) and Regulations.

C. Article VIII(a) applies only to the sending or bringing of a child into a receiving state to a parent or other specified individual by a parent or other specified individual whose full legal right to plan for the child has been established by law at the time prior to initiation of the placement arrangement, and has not been voluntarily terminated, or diminished by the action of any Court.

**Regulation 4 - Residential Placement**

Regulation 4 further clarifies those various classes of institutions in Article 11(d)

A. “Primary educational institution” operates programs where the primary purpose of accepting children is to meet their education needs and which; (1) does not meet responsibility for the entire year; (2) does not provide child care constituting nurture sufficient to substitute for parental supervision and control of foster care; (3) does not provide any other services except for customarily regarded as extracurricular school activities.

B. “Hospital” means an institution for the acutely ill which discharges its patients when they are not longer ill. Primary purpose is treating an acute medical problem.

C. “Institution for the mentally ill or mentally defective” provides medical care and treatment, psychiatric care and treatment, corrective, therapeutic or rehabilitative treatment for mentally ill or developmentally challenged persons.

The type of license held by an institution is evidence of its character, but applicability of the Compact is to be determined by the services it actually provides or offers to provide.
**Regulation 5 - Central State Compact Office**

This regulation established the responsibility of each state to establish a procedure by which all Compact referrals from and to the state shall be made through a central Compact Office. The Compact office shall also be a resource for inquiries into requirements for placements into the state for children who come under the purview of this Compact.

**Regulation 6 - Permission to Place Child: Time Limitations, Reapplication**

Regulation 6 states that the approval to place is valid during a period of six (6) months commencing on the date when the receiving state compact administrator signs the ICPC 100A. Once the placement is made, it may continue until one of the events listed in Article V(a) causes its termination.
**Regulation 7 - Priority Placement**

ICPC Regulation 7 establishes ICPC procedures for priority out-of-state placement of children. To establish a Priority Placement Request, the court, upon request, or on its own motion, determines that a proposed priority placement of a child from one state to another is required.

The court order is not valid unless it contains a specific finding that the following circumstances apply AND sets the facts on which the court based its finding.

**Requirements for a Priority Placement**  
*(Foster Care and Adoptive Placements Do Not Apply)*

There are two conditions in which you may use to request an expedited home study. To request a priority placement under Condition 1, request is usually the initial (1st) home study referral sent to the Kansas ICPC, and must be a parent, grandparent, adult brother, adult sister aunt or uncle.)

**One of the following (A, B, or C) must apply and be noted in the court order:**

**Condition I**
- The child is less than two years of age; or
- The child is in an emergency shelter; or
- The child has spent a substantial amount of time in the home of the proposed recipient. (It must be documented in the court how the judge reached this determination.)

**OR YOU MAY USE**

**Condition II**
- If you have already submitted a home study request to Kansas ICPC, the receiving state has 30 working days (60 calendar days) to assign and complete the home study and forward a decision on to the Kansas ICPC Office.
- If the Kansas ICPC office has not received a home study and decision from the receiving state within this mandated time frame, you may petition your court to sign a Regulation 7 court order. The court order must document the reason for the expedited home study request using Condition II.
- Before petitioning the court for this Regulation 7 court order, please verify with the Kansas ICPC Office that this information has not been received or that explanation of delay has not been received and placed in the file.
Times Frames for Regulation 7

The following time frames are applicable to the sending state for all Regulation 7 priority placements.

- The court has two (2) working days to forward the Regulation 7 court order to the local sending office.

- The local sending office has three (3) working days to complete the required forms and documentation and forward to the sending state’s ICPC compact administrator.

- The sending state’s ICPC compact administration has two (2) working days to process the material and send it to the receiving state’s compact administrator.

- On the day the placement decision is received from the other state, the sending state ICPC compact administrator shall forward the placement decision by fax to the local sending agency.

- If the placement is approved by the receiving state the local social worker shall proceed with placement planning the SAME working day.

- If the receiving state denies the placement, the local social worker shall notify the court the SAME working day, and proceed with alternative planning for the child.

If Kansas is the receiving state, the state has twenty (20) working days to assess the family and approve or deny the placement.

- The receiving state’s compact administrator has two (2) working days to forward the request to the local office for service.

- The social worker assigned the case in the receiving state has five (5) working days to contact the proposed care taker and make a home visit.

- The social worker has eighteen (18) working days to complete the family assessment and forward it to the compact administrator in their state.

- The social worker in the receiving state shall inform their compact administrator, in writing or by e-mail, within two (2) working days that the prescribed time frames cannot be met, the reasons for the delay and projected time frames as to when the assessment will be completed.
• The compact administrator has one (1) working day to forward the ICPC 100A, along with the completed family assessment, if approved, to the sending states compact administrator.

**Failure of Receiving State to Comply with a Regulation 7 Request**

If the receiving state compact administrator fails to complete actions in the established time frames, the court which issued the court order, may inform the appropriate court in the receiving state, provide them with the relevant documentation and request their assistance. Within its jurisdiction and authority in the receiving state, the court may render such assistance and issue appropriate orders requiring compliance to Regulation 7. (See Section 10 for Regulation 7 priority request forms.)

**Regulation 8 - Change of Placement Purpose**

This regulation authorizes the use of the 100B to be prepared and sent with accompanying instructions to show a change in purpose in an existing placement, e.g. from foster care to pre-adoption or if the family has moved to a different address even though the placement recipient remains the same. Normally, the receiving state will require a new ICPC 100A when the placement status has changed from relative/foster care to adoption. It should be provided by the sending agency and transmitted in accordance with the usual procedures in processing.

**NOTE:** Kansas requires a new 100A along with supporting documentation whenever a placement change is made.
**Regulation 9 - Definition of a Visit**

1. A visit is not a placement within the meaning of the Interstate Compact on the Placement of Children. Visits and placements are distinguished on the basis of purpose, duration, and the intention of the person or agency with responsibility for planning for the child as to the child’s place of abode.

2. The purpose of a visit is to provide the child with a social or cultural experience of short duration, such as a stay in a camp or with a friend or relative who has not assumed legal responsibility for providing child care services.

3. It is understood that a visit for twenty-four (24) hours or longer will necessarily involve the provision of some services in the nature of child care by the person or persons with whom the child is staying. The provision of these services will not, of itself, alter the character of the stay as a visit.

4. If the child’s stay is intended to be for no longer than thirty (30) days and if the purpose is as described in Paragraph 2, it will be presumed that the circumstances constitute a visit rather than a placement.

5. A stay or proposed stay of longer than thirty (30) days is a placement or proposed placement, except that a stay of longer duration may be considered a visit if it begins and ends within the period of a child’s vacation from school as ascertained from the academic calendar of the school. A visit may not be extended or renewed in a manner which causes or will cause it to exceed thirty (30) days or the school vacation period, as the case may be. If a stay does not from the outset have an express terminal date, or if its duration is not clear from the circumstances, it shall be considered a placement or proposed placement and not a visit.

6. A request for a home study or supervision made by the person or agency which sends or proposes to send a child on a visit will conclusively establish that the intent of the stay or proposed stay is not a visit.

7. A visit as defined in this regulation is not subject to the Interstate Compact on the Placement of Children.

8. Words and phrases used in this regulation have the same meanings as in the Compact, unless the context clearly requires another meaning.

9. This regulation as first adopted April 26, 1983, by resolution of the Association of Administrators of the Interstate Compact on the Placement of Children is readopted pursuant to Article VII of the Interstate Compact on Placement of Children by action of the Association of Administrators of the Interstate Compact on the Placement of Children at its annual meeting of April 1999.

**Regulation 10 - Guardians**

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As used in the Interstate Compact on the Placement of Children (ICPC) and in this Regulation:

(a) “Guardian” means a public or private agency, organization or institution which holds a valid and effective appointment from a court of competent jurisdiction to have custody and control of a child, to plan for the child, and to do all other things for or on behalf of a child which a parent would have authority and responsibility for doing by virtue of an unrestricted parent-child relationship. Guardian also means an individual who is a non-agency guardian as defined in subparagraph(b) hereof.

(b) “Nonagency guardian” means an individual holding a currently valid appointment from a court of competent jurisdiction to have all of the authority/responsibility of a guardian as defined in subparagraph (a).

2. Prospective Adoption Parents Not Guardians

An individual with whom a child is placed as a preliminary to a possible adoption cannot be considered a non-agency guardian of the child, for the purpose of determining applicability of ICPC to the placement, unless the individual would qualify as a lawful recipient of a placement of the child without having to comply with ICPC as provided in Article VIII (a) thereof.

3. Effect of Guardianship on ICPC Placements

(a) An interstate placement of a child with a nonagency guardian, whose appointment to the guardianship existed prior to consideration of the making of the placement, is not subject to ICPC if the sending agency is the child’s parent, stepparent, grandparent, adult brother or sister, or adult uncle or aunt.

(b) An appropriate court of the sending agency’s state must continue its jurisdiction over a non-exempt placement until applicability of ICPC to the placement is terminated in accordance with Article V (a) of ICPC.

4. Permanency Status of Guardianship

(a) A state agency may pursue a guardianship to achieve a permanent placement for a child in the child welfare system, as required by federal or state law. In the case of a child who is already placed in a receiving state in compliance with ICPC, appointment of the placement recipient as guardian by the sending state court is grounds to terminate the applicability of the ICPC when the sending and receiving state compact administrators concur on the termination pursuant to Article V(a). In such an instance, the court which appointed the guardian may continue its jurisdiction if it is maintainable under another applicable law.
(b) If, subsequent to the making of an interstate placement pursuant to ICPC, a court of the receiving state appoints a non-agency guardian for the child, such appointment shall be construed as a request that the sending agency and the receiving state concur in the discontinuance of the application of ICPC to the placement. Upon concurrence of the sending and receiving states, the sending agency and an appropriate court of the sending state shall close the ICPC aspects of the case and the jurisdiction of the sending agency pursuant to Article V(a) of the ICPC shall be dismissed.

5. Guardian Appointed by Parent.

If the statutes of a jurisdiction so provide, a parent who is chronically ill or near death may appoint a guardian for his or her children, which guardianship shall take effect on the death or mental incapacitation of the parent. A nonagency guardian so appointed shall be deemed a nonagency guardian as that term is used in Article VIII(a) of ICPC, provided that such nonagency guardian has all of the powers and responsibilities that a parent would have by virtue of an unrestricted parent-child relationship. A placement with a nonagency guardian as described in this paragraph shall be effective for the purposes of ICPC without court appointment or confirmation unless the statute pursuant to which it is made otherwise provides and if there is compliance with procedures required by the statute. However, the parent must be physically present in the jurisdiction having the statute at the time he or she makes the appointment or expressly submits to the jurisdiction of the appointing court.

6. Other Definitions of Guardianship Unaffected.

The definitions of “guardian” and “nonagency guardian” contained in this regulation shall be construed to affect the meaning or applicability of any other definitions of “guardian” or “nonagency guardian” when employed for purposes or to circumstances not having a bearing on placements proposed to be made or made pursuant to ICPC.

7. Words and phrases used in this regulation have the same meanings as Compact, unless the context clearly requires another meaning.

8. This regulation is adopted pursuant to Article VII of the Interstate Compact on the Placement of Children by action of the Association of Administrators of the ICPC and its annual meeting of April 1999.
Miscellaneous Topics

SECTION 14
FINANCIAL ARRANGEMENTS

It is the obligation of the sending agency to retain its responsibility for case planning for the child which will appropriately include the child’s financial and/or medical needs. Placements often fail due to financial problems from lack of resources to meet the child’s needs.

The sending state may meet its obligation by:

- Arranging for the child to receive Medicaid benefits from the receiving state, whenever possible. If not, the sending state must assist the child to obtain needed medical services.

- Requesting the receiving state to provide services to the child and/or the child’s family in accordance with the family’s eligibility for any such services.

- Arranging to purchase services from an agency within the receiving state.

- Determining if the child will be eligible for public assistance such as TANF, food stamps, medical assistance, etc.

Each state has the option under TANF to establish a “child only grant” for children placed with relatives or including the relatives in the requirements associated with TANF-time limitation, work requirements, etc.

It is important that potential eligibility be determined in advance. Necessary verifications, such as birth certificate, social security card, will need to be provided to establish eligibility.

It is assumed that the parent(s) will assume full financial and medical responsibility for meeting the needs of the child, utilizing whatever private and/or public resources are available.

Appropriate financial/medical plans must be in place PRIOR to placement. This will greatly minimize disruption. It is also important to send adequate clothing, toys, personal items, etc., with the child. A supply of medical with correct and clear instructions for administering the medicine should also be sent.
EDUCATIONAL COSTS

In considering the placement of a school-age child across state lines, it is necessary to review applicable laws in the sending state and the receiving state relating to educational costs, including compulsory attendance requirements.

Educational costs may be handled differently in different states.

Receiving state may expect the sending agency to pay tuition costs. (Educational costs are expected for placements in some residential facilities in Missouri) Are you willing to pay?

Sending state is responsible for paying educational costs if the receiving state imposes such costs.

BORDER STATE AGREEMENT

Kansas has entered into a border state agreement with the state of Missouri to facilitate the timely completion of family assessments. Contact the Kansas ICPC Office for more information about the border state agreement.
OTHER COMPACTS

INTERSTATE COMPACT ON ADOPTION AND MEDICAL ASSISTANCE

This Compact was initiated to facilitate the issuance of a medical card for those children who are IV-E eligible and receiving adoption assistance in the state in which they reside. Some states will also reciprocate for IV-E eligible foster children.

INTERSTATE COMPACT ON JUVENILES

This Compact is administered by the Juvenile Justice Authority. It is used for juvenile offenders who are on probation, parole or conditional release. It is also used to return runaway youth in the custody of SRS, who refuse to return.

INTERSTATE COMPACT ON MENTAL HEALTH

This Compact allows for the transfer of a person in a mental health institution in one state to a mental health institution in another state.

FREQUENTLY ASKED QUESTIONS
<table>
<thead>
<tr>
<th>QUESTIONS</th>
<th>ANSWERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>How long does it take for a home study to be completed?</td>
<td>Please allow calendar 60 days for other states to complete the study.</td>
</tr>
<tr>
<td>How can the sending agency find out the status of a home study?</td>
<td>Send a memo to your agency liaison in triplicate requesting the status.</td>
</tr>
<tr>
<td>Can correspondence be sent direction to worker in the other state?</td>
<td>No, unless you have received prior approval from your ICPC office.</td>
</tr>
<tr>
<td>Can we travel to the other state and visit with the family when placement is made?</td>
<td>You may not go across state lines and practice social work unless you are licensed in that state.</td>
</tr>
<tr>
<td>Can a child be sent for a visit with a family that we have requested to be assessed?</td>
<td>No, this would be seen as an illegal placement.</td>
</tr>
<tr>
<td>When can we send a child for a visit?</td>
<td>You may send a child across state lines for a visit for 30 days or less without ICPC approval, if the visiting resource is not being assess for placement of the child.</td>
</tr>
<tr>
<td>How does the receiving state know to begin supervision of a placement?</td>
<td>Sending agency completes 100B, showing placement, and forwards to their ICPC office.</td>
</tr>
<tr>
<td>Once placement is approved and child is placed, may we terminate and close the case?</td>
<td>No, this would be in violation of Article V of the Compact.</td>
</tr>
<tr>
<td>How long must the sending agency retain jurisdiction?</td>
<td>Until written approval has been received through ICPC. Supervision usually occurs for 6 months and/or up to age of majority.</td>
</tr>
<tr>
<td>What could happen if we place a child in another state without ICPC approval?</td>
<td>The other state could refuse services to the family. If relative, they could refuse public assistance, and they may have the child returned to Kansas. The sending agency could also lose or have their license suspended. Illegal placements are also subject to sanctions established by the receiving state’s statutes in accordance with Article IV.</td>
</tr>
<tr>
<td>How many copies of materials do we send?</td>
<td>We require the 100A form (6 pages). The sending agency retains last copy and sends remains 5 to their ICPC office. All other materials required in the referral are sent in triplicate. (Please separate materials.)</td>
</tr>
<tr>
<td><strong>What is Regulation 7?</strong></td>
<td><strong>The following applies to Regulation 7:</strong></td>
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<tr>
<td>--------------------------</td>
<td>------------------------------------------</td>
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<td></td>
<td>The court will determine if a priority placement, upon request or by its own motion. The proposed placement and recipient is a parent grandparent, adult brother or sister, aunt or uncle. One of the following must apply: 1) The child must be under 2 years of age. 2) The child is in an emergency shelter. 3) The court finds that the child has spent a substantial amount of time in the home of the proposed recipient.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>What is the time frame for Regulation 7?</strong></th>
<th><strong>The receiving state must complete the home study within 20 working days.</strong></th>
</tr>
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<tbody>
<tr>
<td></td>
<td>The sending agency shall Federal Express the Regulation 7 packet to this ICPC office within 3 days of the judge signing the court order. Must include a Federal Express mailer and the materials shown on the ICPC check list, which would complete the referral.</td>
</tr>
<tr>
<td></td>
<td>The ICPC office will Federal Express the referral to the receiving state. The sending agency needs to enclosed their own Federal express mailing label. ICPC does not provide this.</td>
</tr>
</tbody>
</table>

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<thead>
<tr>
<th><strong>What needs to be sent with the referral when requesting the Regulation 7?</strong></th>
<th><strong>Send the complete referral by using the checklist. Attach the signed court order for the Regulation 7 and the ICPC 101 form (Sending State Priority Home Study Request)</strong></th>
</tr>
</thead>
</table>

The Forms

SECTION 15

ICPC 100 A - CFS 4013:
  Interstate Compact Placement Request

ICPC 100 B - YA 3305:
  Interstate Compact Report on Child’s Placement Status

ICPC 101:
  Sending State's Priority Home Study Request

YA 2300: Medical and Genetic Information for Child, Genetic and Medical History of Mother/ Father

CFS-4018
  Interstate Compact Financial/Medical Plan
  If Child is Placed Out-of-State

Miscellaneous Forms/Guides
**INTERSTATE COMPACT PLACEMENT REQUEST**  
(ICPC 100A)  
Rev. 1/97

<table>
<thead>
<tr>
<th>TO: (Name and address of Compact Administrator in Receiving State)</th>
<th>FROM: (Name and address of Compact Administrator in Sending State)</th>
</tr>
</thead>
</table>

### SECTION I - IDENTIFYING DATA

<table>
<thead>
<tr>
<th>Notice is given of intent to place:</th>
<th>NAME OF CHILD</th>
<th>SEX</th>
<th>DATE OF BIRTH</th>
<th>ETHNIC GROUP</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF MOTHER</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>NAME OF FATHER</td>
<td></td>
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</tr>
<tr>
<td>NAME OF AGENCY OR PERSON RESPONSIBLE FOR PLANNING FOR CHILD</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>STREET ADDRESS</td>
<td></td>
<td>CITY</td>
<td>STATE</td>
<td>ZIP CODE</td>
</tr>
<tr>
<td>NAME OF AGENCY OR PERSON FINANCIALLY RESPONSIBLE FOR CHILD</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>STREET ADDRESS</td>
<td></td>
<td>CITY</td>
<td>STATE</td>
<td>ZIP CODE</td>
</tr>
</tbody>
</table>

### SECTION II - PLACEMENT INFORMATION

<table>
<thead>
<tr>
<th>NAME OF PERSON(S) OR FACILITY CHID IS TO BE PLACED WITH</th>
<th>TELEPHONE NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>STREET ADDRESS</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TYPE OF CARE:</th>
<th>☐ Parent</th>
<th>☐ Relative (Relationship)</th>
<th>☐ Foster Home</th>
<th>☐ Institution Care (Article VI)</th>
<th>☐ Group Home</th>
<th>☐ Child Caring Institution</th>
<th>☐ Residential</th>
<th>☐ Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Parent Home Study</td>
<td>☐ Adoptive Home Study</td>
<td>☐ Relative Home Study</td>
<td>☐ Foster Home Study</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Court Jurisdiction Case Only</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LEGAL STATUS:</th>
<th>☐ Sending Agency Custody/Guardianship</th>
<th>☐ Parental Rights Severed- Right to Place For Adoption</th>
<th>☐ Unaccompanied Refugee minor</th>
<th>☐ Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Parent Custody/ Relative Custody or Guardianship</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### SECTION III - SERVICES REQUESTED

<table>
<thead>
<tr>
<th>INITIAL REPORT</th>
<th>☐ Parent Home Study</th>
<th>☐ Adoptive Home Study</th>
<th>☐ Relative Home Study</th>
<th>☐ Foster Home Study</th>
<th>☐ Requesting Receiving State to Arrange Supervision</th>
<th>☐ Another Agency Agreed to Supervise</th>
<th>☐ Sending Agency to Supervise</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Yes</td>
<td>☐ Quarterly</td>
<td>☐ Semi-Annually</td>
<td>☐ Annually</td>
<td>☐ Upon Request</td>
<td>☐ Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ No</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SUPERVISORY REPORTS</th>
<th>☐ Quarterly</th>
<th>☐ Semi-Annually</th>
<th>☐ Annually</th>
<th>☐ Upon Request</th>
<th>☐ Other</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF SUPERVISING AGENCY IN RECEIVING STATE</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>ENCLOSURES:</td>
<td>☐ Child’s Social History</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SIGNATURE OF SENDING AGENCY OR PERSON</th>
<th>DATE SIGNED</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>SIGNATURE OF SENDING STATE COMPACT ADMINISTRATOR OR ALTERNATE</th>
<th>DATE SIGNED</th>
</tr>
</thead>
</table>

### SECTION IV - ACTION BY RECEIVING STATE

<table>
<thead>
<tr>
<th>☐ Placement May Be Made</th>
<th>☐ Placement Shall Not Be Made</th>
<th>COMMENTS:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>SIGNATURE OF RECEIVING STATE COMPACT ADMINISTRATOR OR ALTERNATE</th>
<th>DATE SIGNED</th>
</tr>
</thead>
</table>

**DISTRIBUTION**

Complete 1 set of forms (6 copies) on each child  
Sending Agency retains 1 copy (last page) and forwards 5 copies  
Sending Compact Administrator retains 1 copy and forwards 4 copies to Receiving Compact Administrator or Alternate  
Receiving Agency Compact Administrator indicates action (Section IV) and forwards 1 copy to receiving agency and 2 copies to sending Compact Administrator within 30 days.  
Sending Compact Administrator retains 1 completed copy and forwards the other completed copy to Sending Agency
The 100A is a legally binding contract between the respective states. By initiating this contract, we agree to follow the terms of the Compact.

To: ENTER "RECEIVING STATE NAME"  From: ENTER "KANSAS"

SECTION I

NAME OF CHILD  Enter child’s name as shown on birth certificate, sex, birth date, and ethnic group.

NAME OF MOTHER & FATHER  Enter full names or UNKNOWN when appropriate. If parental rights are severed, note (PRT). If parent is deceased note: Paul Smith (deceased).

NAME OF AGENCY OR PERSON RESPONSIBLE FOR PLANNING:

This is usually the agency having custody and control by relinquishment or court order, i.e. SRS, the Court, JJA. Due to privatization, the CW/CBS provider who has responsibility for foster care and adoption case management would be the planning agency, although SRS has custody. For privatization cases, be sure that the worker handling this case types or writes her/his name beside the agency name.

There are some instances that the court is the sending agency and usually the judge will appoint the SRS worker to complete the ICPC process. When a case is a court jurisdiction case only, the 100A will need to be completed showing the courts as the sending agency and financially responsible. The judge will need to sign the 100A. Remember to complete the address, telephone number, city and state.

NAME OF AGENCY OR PERSON FINANCIALLY RESPONSIBLE:

Almost always the planning party for the child and the agency financially responsible are the same. The instances where this may be different is when the courts have named SRS as the planning agency for child but with court jurisdiction only. The SRS worker would be the planning party with the Courts as the financially responsible party. The worker may sign the 100A because the journal entry will say that SRS is the planning person for the child. If the child is not in SRS custody, we are not financially responsible, the courts will be.

The parent will only be noted in this space if the parent is the sending agency and is placing their child in a facility of some kind. This child would not be in SRS custody nor in state’s custody, but in the parent’s custody.

Due to privatization, CW/CBS provider will be financially responsible for the child even though SRS has legal custody. SRS will remain financially responsible for adoption subsidy for eligible children. When the planning agency and the financially responsible agency are the same, you may enter SAME AS ABOVE on this line.
SECTION II

NAME OF PERSON OR FACILITY CHILD IS TO BE PLACED WITH: If child is to be placed with a couple, please indicate both names and complete address/phone number.

TYPE OF CARE: You must check the appropriate box. If placement is to be with a relative and the plan is to make a foster care placement, check both foster home and relative. For adoptive placement, check Other.

TITLE IV-E: This is mandatory and must be marked.

LEGAL STATUS: You must always check one of these boxes.

Due to privatization, the box marked Other needs to be checked (See example, page 35). The contractor or sub-contractor will need to write or type in the following: SRS custody w/(CW/CBS provider’s name) being financially responsible.

SECTION III

SERVICES REQUESTED: Mark the box for the appropriate type of study requested, based on type of care checked in Section II. If you wish to have a biological parent assessed but parental rights have been severed, you will need to decide if the parent will be evaluated as foster home or an adoptive placement. Please remember that when parental rights have been severed, parents and relatives are legally no longer related to the child and will need to either be licensed as a foster home or adoptive placement. Due to privatization, these cases are the responsibility of the provider and it will be their financial responsibility to pay the other states foster care rate.

SUPERVISORY SERVICES Generally, the box to request the receiving state to arrange supervision should be checked. In some instances, attorneys, SRS or contractor(s) may purchases services from a licensed private child placing agency in another sate due to different circumstances. Remember! our Kansas workers cannot go into another state and practice social work. If placing a child in a Group Home, Residential, or short term program, the other state will not supervise these placements, therefore the box should be marked where it indicates Other Agency to Supervise. (This means the group home or residential facility will supervise.)

SUPERVISORY REPORTS: In nearly all cases, quarterly reports are requested. If you need them sent to you other than what is noted, you will need to mark the box Other and indicate how often you want reports sent. This is a contract agreement between states, so please make sure the appropriate box is marked before sending to the Kansas ICPC office or they will not provide this service.
NAME AND ADDRESS OF SUPERVISING AGENCY IN OTHER STATE: You may not have this information available to you. If not this can remain blank and the other state may complete this information if they choose. If you have arranged to pay for another agency to provide this service, please include the name and address. Note: the agency will have to be appropriately licensed to provide this service in the receiving state.

SIGNATURE OF SENDING AGENCY OR PERSON: This is usually the social worker for SRS or the contractor or sub-contracting agencies worker who the case has been assigned. This should have been indicated in Section I.

SIGNATURE OF SENDING STATE COMPACT ADMINISTRATOR: This is signed by the person authorized to sign in behalf of the Kansas Interstate Compact office. (See Compact Staff)

SIGNATURE OF RECEIVING STATE COMPACT ADMINISTRATOR OR ALTERNATE: This is signed by the authorized person in the compact office located in the receiving state when a decision has been made on a placement. The Date this is signed by the receiving state starts the 6 month approval period for placement.
**INTERSTATE COMPACT REPORT ON CHILD’S PLACEMENT STATUS**

<table>
<thead>
<tr>
<th>A. NAME OF CHILD</th>
<th>B. BIRTH DATE OF CHILD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. NAME OF MOTHER</th>
<th>D. NAME OF FATHER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>E. PLACEMENT OF CHILD WITH:</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME: ______________________</td>
</tr>
<tr>
<td>Address: ____________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>F. PLACEMENT CHANGES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Change ___ / ___ / ___</td>
</tr>
<tr>
<td>[ ] Discharged From Placement</td>
</tr>
<tr>
<td>[ ] Change of Address While In Receiving State</td>
</tr>
<tr>
<td>Name: ____________________</td>
</tr>
<tr>
<td>Address: ____________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>G. COMPACT TERMINATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reasons:</td>
</tr>
<tr>
<td>[ ] Child Returned to Sending State</td>
</tr>
<tr>
<td>[ ] Withdrawing Placement Request</td>
</tr>
<tr>
<td>[ ] Sending State’s Jurisdiction Terminated</td>
</tr>
<tr>
<td>[ ] Legal Custody and/or Guardianship Awarded and/or Returned To: (see below)</td>
</tr>
<tr>
<td>NAME ____________________</td>
</tr>
<tr>
<td>ADOPTION FINALIZED IN:</td>
</tr>
<tr>
<td>[ ] IN RECEIVING STATE</td>
</tr>
</tbody>
</table>

Signature of Person/Agency Supplying This Information Date

Signature of Compact Administrator or Alternate Date

Sending Person/Agency Retains LAST Copy (1)
Forward Other Three (3) Copies On to Your ICPC Office

(This form supersedes CY-2867, 5-93 and YA-3305, 5-95)
INSTRUCTIONS

ICPC 100B (YA3305) -- Report on Child’s Placement Status

- Complete the 100 B after the placement occurs, indicating the date of placement. The 100 B initiates supervision by the receiving state.

- Use 100 B to notify ICPC of placement changes or status of case.

- Complete to terminate placement and supervision.

- Complete to close the case.

INTERSTATE COMPACT REPORT ON CHILD’S PLACEMENT STATUS

<table>
<thead>
<tr>
<th>To: Enter the “Receiving State Name”</th>
<th>From: “Kansas”</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Enter full name of child</td>
<td>B. Enter Birth Date</td>
</tr>
<tr>
<td>C. Enter name of Mother or PRT</td>
<td>D. Enter name of Father or PRT</td>
</tr>
</tbody>
</table>

(above completed for each transmittal)

E. PLACEMENT OF CHILD WITH:
Enter full names, address. Indicate Date Placed. Mark type of Placement

F. PLACEMENT CHANGES
Indicate Date of Change
Mark appropriate section. Note change of address

G. COMPACT TERMINATION
Indicate Date of Termination Check Reason for Termination
Indicate Date and Location of Adoption Finalization. Sign and submit to ICPC Office with Decree of Adoption or other court orders, if applicable. (three copies)
ICPC 101
SENDING STATE PRIORITY HOME STUDY REQUEST

This is a form (located on page 92) is submitted with the referral packet for a Priority Home Study Request along with the ICPC 100A and required information.

It provides specific information to enable the worker to contact the family to initiate the home study.
ASSOCIATION OF ADMINISTRATORS OF THE INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN

ICPC-101
August 1996

SENDING STATE
PRIORITY HOME STUDY REQUEST
To be submitted by Social Worker with other required ICPC materials

Name of Child¹ to be placed ___________________________ Age _____ Mother’s Name ___________________________

Ethnic Group ___________________________ DOB ___________________________ Father’s Name ___________________________

PROPOSED CARETAKER
NAME: ___________________________________ Marital Status: S M Sep. D W (circle one) Living with (name of person)
ADDRESS: ________________________________________________________________

Telephone Home #: ___________________ Work #: ___________________ Social Security #: ______________________

Relationship to child identified above: __________________________________________

Best time of day to contact caretaker: ___________________ Employer ___________________ (if applicable)

Alternate Contact Name & Address: ____________________________________________

ASSESSMENT OF CHILD
Case Plan Attached: yes no (circle one) Financial/ Medical Plan attached: yes no (circle one)

Special Needs: ________________________________________________________________

Handicaps: Mental/Physical _____________________________________________________

Service Needs/Treatment Requirements: _________________________________________

School Information: ___________________________________________________________

Other required pertinent information regarding child and family will follow: yes no (circle one)

Worker’s Name ____________________________________________________________ (please print) (Tel. #)

Worker’s Signature ________________________________________________________ (date)

Supervisor’s Signature _______________________________________________________ (if required) (date) (Tel. #)

¹ If there is more than one child to be placed with the proposed caretaker, list the name of the child(ren) and all requested information on a separate page and attach to this form.
# MEDICAL AND GENETIC INFORMATION FOR CHILD

## PART I. MEDICAL HISTORY OF CHILD

<p>| | | | | |</p>
<table>
<thead>
<tr>
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<tbody>
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<tr>
<td>6. Apgar Score</td>
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<tr>
<td>1 min.</td>
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<tr>
<td>5 min.</td>
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<tr>
<td>7. Premature (mos/wks)</td>
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<td></td>
</tr>
<tr>
<td>8. Weight at Birth</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>9. Length at Birth</td>
<td></td>
<td></td>
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<tr>
<td>10. Type of Delivery</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Duration of Labor</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Breast Fed?</td>
<td></td>
<td></td>
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<tr>
<td>13. Formula?</td>
<td></td>
<td></td>
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<tr>
<td>14. Name &amp; Address of Attending Physician:</td>
<td></td>
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<tr>
<td>(Attach copy of records or authorized release.)</td>
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<tr>
<td>15. Complications of Birth:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Include any birth injury to child.)</td>
<td></td>
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</tr>
<tr>
<td>16. Medications Given:</td>
<td>(From Birth until Placement)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17. Birth Defects:</td>
<td>(Specify)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Immunization History:</td>
<td>(Attach copy of child’s immunization records.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Dates of Significant Illnesses or Hospitalizations:</td>
<td>(Specify type of illness, name &amp; address of physician and or hospital. Attach records or authorized release.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Does this child have any significant growth or development problems?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. Does this child have any chronic health conditions?</td>
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</tr>
<tr>
<td>22. Does this child suffer from any serious emotional and/or behavior problems? If yes, indicate test results, diagnoses, and names &amp; addresses of therapists.</td>
<td></td>
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</tr>
<tr>
<td>23. Does this child have significant learning disabilities?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24. Medical Conditions:</td>
<td>(Describe on separate sheet)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Allergies/Asthma</td>
<td>Down’s Syndrome</td>
<td>Growth problems</td>
<td>Sickle Cell Anemia</td>
<td></td>
</tr>
<tr>
<td>Anemia</td>
<td>Drug usage/dependence</td>
<td>HIV/AIDS</td>
<td>Spina Bifida</td>
<td></td>
</tr>
<tr>
<td>Anorexia/Bulime</td>
<td>Epilepsy</td>
<td>Kidney condition</td>
<td>Vision condition/blind</td>
<td></td>
</tr>
<tr>
<td>Cancer</td>
<td>Hearing condition/deaf</td>
<td>Mental Retardation</td>
<td>Other (please specify)</td>
<td></td>
</tr>
<tr>
<td>Congenital Abnormality</td>
<td>Heart condition</td>
<td>Muscular Condition</td>
<td>Other (please specify)</td>
<td></td>
</tr>
<tr>
<td>Diabetes</td>
<td>Hepatitis (specify type)</td>
<td>Orthopedic condition</td>
<td>Other (please specify)</td>
<td></td>
</tr>
<tr>
<td>25. Developmental Milestones (Indicate age milestone was accomplished)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Milestone</td>
<td>Age</td>
<td>Milestone</td>
<td>Age</td>
<td>Milestone</td>
</tr>
<tr>
<td>Turned Over</td>
<td>Stood</td>
<td>Toilet Trained</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sat Alone</td>
<td>Walked</td>
<td>Used Words</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Crawled</td>
<td>Fed Self</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date of Birth/Sex of Child’s Siblings:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
PART II. GENETIC AND MEDICAL HISTORY OF MOTHER

<table>
<thead>
<tr>
<th></th>
<th>Mother</th>
<th>Mother’s Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Name</td>
<td>2. Date of Birth:</td>
<td>3. Birthplace</td>
</tr>
<tr>
<td>4. Address</td>
<td>5. Social Security #</td>
<td></td>
</tr>
<tr>
<td>6. Medications, drugs, and alcohol used before and during this pregnancy.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Were there any complications or problems during pregnancy or delivery? Explain:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Physical Description:</td>
<td>Height</td>
<td>Weight</td>
</tr>
<tr>
<td>9. General Health including hospitalization or surgery.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Check any of the following health conditions which appear in yourself or your family’s health background:</td>
<td>For any condition checked, please provide additional information that may be available (such as, type of mental illness, descriptions of congenital defect, which member of family, age at onset, etc. Please attach additional information on a separate sheet of paper.)</td>
<td></td>
</tr>
<tr>
<td>Mother’s Family</td>
<td>Mother</td>
<td>Mother’s Family</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Alcoholism</td>
<td>HIV/AIDS</td>
<td></td>
</tr>
<tr>
<td>Allergies/Asthma</td>
<td>Kidney Condition</td>
<td></td>
</tr>
<tr>
<td>Bipolar Disorder (specify type)</td>
<td>Mental Retardation</td>
<td></td>
</tr>
<tr>
<td>Cancer</td>
<td>Muscular Condition</td>
<td></td>
</tr>
<tr>
<td>Congenital Abnormality</td>
<td>Other Mental Illness (please specify)</td>
<td></td>
</tr>
<tr>
<td>Diabetes</td>
<td>Schizophrenia</td>
<td></td>
</tr>
<tr>
<td>Down’s Syndrome</td>
<td>Sickle Cell Anemia</td>
<td></td>
</tr>
<tr>
<td>Drug usage/dependence</td>
<td>Sexually Transmitted Disease (please specify)</td>
<td></td>
</tr>
<tr>
<td>Epilepsy</td>
<td>Spina Bifida</td>
<td></td>
</tr>
<tr>
<td>Hearing problems/deaf</td>
<td>Vision problems/blind</td>
<td></td>
</tr>
<tr>
<td>Heart condition</td>
<td>Other (please specify)</td>
<td></td>
</tr>
<tr>
<td>Hepatitis</td>
<td>Other (please specify)</td>
<td></td>
</tr>
</tbody>
</table>

11. Race and/or Nationality
12. Tribal affiliation: If yes, name of tribe:
13. Religion
14. Occupation & employment history

The information I have given above is true and correct to the best of my knowledge. I understand that if at anytime in the future I become aware of any information or conditions which might affect the health, development or physical condition of my child or my child’s offspring, I may notify, in writing, the Department of Social and Rehabilitation Services, Attention: Child Welfare Director, Children & Family Services, 915 SW Harrison, DSOB-5th Floor, Topeka, Kansas 66612, (785) 296-4653.
PART III. GENETIC AND MEDICAL HISTORY OF FATHER

<table>
<thead>
<tr>
<th>1. Name</th>
<th>2. Date of Birth:</th>
<th>3. Birthplace</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Address

5. Social Security #

6. Physical Description:

<table>
<thead>
<tr>
<th>Height</th>
<th>Weight</th>
<th>Eye Color</th>
<th>Hair Color/Texture</th>
<th>Skin Color</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7. General Health including hospitalization or surgery.

8. Check any of the following health conditions which appear in yourself or your family’s health background:

   For any condition checked, please provide additional information that may be available (such as, type of mental illness, descriptions of congenital defect, which member of family, age at onset, etc. Please attach additional information on a separate sheet of paper.)

<table>
<thead>
<tr>
<th>Father’s Family</th>
<th>Father’s Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcoholism</td>
<td>HIV/AIDS</td>
</tr>
<tr>
<td>Allergies/Asthma</td>
<td>Kidney Condition</td>
</tr>
<tr>
<td>Bipolar Disorder (specify type)</td>
<td>Mental Retardation</td>
</tr>
<tr>
<td>Cancer</td>
<td>Muscular Condition</td>
</tr>
<tr>
<td>Congenital Abnormality</td>
<td>Other Mental Illness (please specify)</td>
</tr>
<tr>
<td>Diabetes</td>
<td>Schizophrenia</td>
</tr>
<tr>
<td>Down’s Syndrome</td>
<td>Sickle Cell Anemia</td>
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<td>Drug usage/dependence</td>
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<td>Heart condition</td>
<td>Other (please specify)</td>
</tr>
<tr>
<td>Hepatitis</td>
<td>Other (please specify)</td>
</tr>
</tbody>
</table>

9. Race and/or Nationality

10. Tribal affiliation: If yes, name of tribe:

11. Religion

12. Occupation & employment history

The information I have given above is true and correct to the best of my knowledge. I understand that if at anytime in the future I become aware of any information or conditions which might affect the health, development or physical condition of my child or my child’s offspring, I may notify, in writing, the Department of Social and Rehabilitation Services, Attention: Child Welfare Director, Children & Family Services, 915 SW Harrison, DSOB-5th Floor, Topeka, Kansas 66612, (785) 296-4653.

Date ________________________________ Signed __________________________________________________
KANSAS INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN
FINANCIAL/MEDICAL PLAN

For child placed out of state

<table>
<thead>
<tr>
<th>Receiving State:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>NAME OF CHILD</th>
<th>DOB</th>
<th>Today’s Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td><strong>/<em>/</em></strong>____</td>
</tr>
</tbody>
</table>

Child is Title IV-E eligible ____Yes No ____
This child is SSI eligible ____Yes No __

FINANCIAL PLAN

The form 100A is requesting a RELATIVE home study. (check all that apply)

____ Placement resource is financially able and willing to support this child.
____ May receive foster care payments from Kansas if requested or if receiving state determines family will require FC funds. Family must be approved for placement and become licensed in their state. Kansas would pay receiving state rates.
____ Child is Title IV-E eligible. Receiving state will arrange for Medicaid coverage based upon eligibility.
____ Child is eligible for SSI and resource will be made payee for benefits.
____ Child is not Title IV-E eligible. Resource may apply for Temporary Assistance for Needy Families (TANF).

If receiving state is not reciprocal, Kansas remains financially responsible.

The form 100A is requesting a FOSTER home study. Resource is: (check all that apply)

____ Entitled to receive foster care payments from Kansas when licensed or certified in their state. Kansas would pay the receiving state rate.
____ Entitled to Child’s SSI benefits. Resource will become payee when child is placed.

The form 100A is requesting a PARENT home study. The parent is expected to: (check all that apply)

____ Support this child.
____ Apply for welfare assistance in the receiving state if unable to support this child.

The form 100A is requesting an ADOPTIVE home study. Placement resource is: (check all that apply)

____ Expected to support child.
____ Maybe entitled to an adoption assistant payment which will be determined before child is placed.
____ Expected to apply for assistance in the receiving state if they are unable to support child.

MEDICAL PLAN (check all that apply)

____ Child is Title IV-E eligible and eligible under COBRA to receive medical card in receiving state.
____ Child is eligible for medical card in the receiving state under TANF child-only grant/benefits.
____ Child is not Title IV-E eligible and resides in substitute care. If resource is unable to receive medical coverage in the receiving state, Kansas will issue a Kansas medical card.
____ Child is Medicaid eligible as a recipient of SSI.
____ Placement resource agrees to meet the medical needs of the child without financial assistance from KS.
____ Placement is with Parent & he/she is financially responsible for meeting the medical needs of this child.
____ Child is eligible to receive a medical card through ICAMA once adoption assistance is in place.

Kansas remains responsible for the financial and medical needs of a child who is under Kansas jurisdiction and in the custody of the Secretary of Kansas SRS. In the event of a placement disruption, Kansas is financially responsible for the return of the child as long as Kansas retains jurisdiction.

I HEREBY VERIFY THAT THIS PLAN AND ALL AVAILABLE OPTIONS HAVE BEEN DISCUSSED WITH AND AGREED TO BY THE PROSPECTIVE CARE GIVER(S)

Verified by Social Service Worker ____________________________ Office ____________________________ Phone number __________

DISTRIBUTION: Send 3 copies to the Kansas ICPC office and retain pink copy for your file.
## Basis for Home Study:
- Why does Sending State want to consider this family:
- What is the relationship, if any, to the child:
- What is their understanding of the reason the child is in the custody of the other state:
- What special needs do the child(ren) have:
- If relative, are there any limitations placed on contact with parents:

## Motivation to care for Specific Child:

### Specific Needs of the child:
- Education, Medical, Special Education, Other:
- Describe resources available to meet these needs:

### Social History
- Description of all household members:
- List all members of the household, age, sex, relationship to placement resource:
- Describe relationship of current household members:
- Describe how each family member feels about the placement of an additional child in the family. Impact on sharing rooms, parent’s time:
- Describe each child in the family:
- Describe any special needs of household members: therapy, medical, prior relationship with SRS. **(If there are medical concerns, obtain a release of information, and request medical records from physician)**

### Marital Status
- Describe length and stability of relationship:
- If shared living (unmarried) who will have primary child care responsibility:
- Number of marriages:

### Parenting Ability:
- Describe parenting experience in general:
- Describe strengths and needs in ability to parent specific child(ren):
- Describe discipline practices:
Support of Extended Family Member/Community:
☞ To what extent do extended family members support this placement:
☞ Describe community resources available to assist family meet the child’s needs:

Educational Needs of Child:
☞ Describe specific needs of child to be placed and available resources:

Child Care Plans:
☞ Describe child care plans for pre-school children:
☞ Describe supervision before and after school, if applicable:

Physical Characteristics of the Home:
☞ Describe the home. (Number of rooms, bedrooms, care/maintenance of home):
☞ If child to be placed will need to share a room with a child already in the home, are there any concerns by the parents or the child having to share space:

Employment History:
☞ Describe employment history of each adult household member:
☞ Describe basis for job changes, if frequent in nature:

Finances and Monthly Expenses:
☞ Provide monthly income and budget:
☞ Can family (household) adequately meet their monthly expenses:

Foster Care Payment:
If sending state has not requested foster care licensure, determine if family needs or desires to receive foster care payments from the sending state. If so, notify your ICPC Consultant ASAP in order that sending state can be advised to submit the new 100A for FC. The family will need to become licensed or approved by KDHE if sending state agrees to send payments to family. **Does not apply to parent placements.**

Does family want FC payments? ______ YES ______ NO

Understanding of resources available to assist them care for the child:
☞ What is their understanding of assistance available from the sending state:
☞ If a non-parent relative, are they expected to apply for TANF and Medicaid:
☞ Licensure or approval is required if the sending state plans to make a foster care payment. Does family understand this: ________ YES ________ NO

KBI Checks: Required for all household members, 10 years of age and over.

Have cleared checks been received? ________ YES ________ NO
If NO, briefly explain offenses/convictions:

Child Abuse Checks: Required for all household members 10 years of age and over.
Have cleared checks been received? _______ YES _______ NO
If NO, briefly explain reports and/or substantiations:

**FBI Fingerprint Checks: Required for all adults in household. (Applies only to foster care or adoptive home studies.)**

If required, have cleared checks been received? _______ YES _______ NO
If No, briefly explain offenses/convictions:

**FOR FOSTER CARE/ADOPTIVE PLACEMENTS: Due to Adam Walsh legislation, if proposed placement resource has resided outside of Kansas within the last 5 years, a child abuse and neglect registry check will be required in each state the prospective foster/adoptive parents, and other adult(s) living in the home, have resided in the preceding 5 years.**

If required, have cleared checks been received? _______ YES _______ NO
If No, briefly explain offenses/convictions:

**References:** Include three references. Two should be non-relatives, i.e. employer, neighbor, minister, friend.
Have you received all required references? _______ YES _______ NO
If YES, were all positive? _______ YES _______ NO
If NO, explain:

**Summary and Recommendation:** Provide a strengths/needs summary of the resource family and their ability to parent the referred child. Concerns should be addressed. If you feel resource can parent child with specific services, list those services so the referring state can decide if they want to purchase, if required. A specific recommendation is to be made.

__________________________  _____/_____/______  
Social Worker Signature             Date

__________________________  _____/_____/______  
Supervisor Signature             Date

**The depth** of any one of these sections will be determined by the basis for referral and the specific needs of the child and resource family.

**For foster care licensure or approval:** SRS will need to assist family with forms to be sent to KDHE. Training and preparation of the family will also need to be noted.

Rev. 11/09
Declaration of No Prohibitive Offenses

By signing this document, I declare, to the best of my knowledge, a check of the KBI criminal history database will reveal I have not been convicted of any of the listed crimes, or the conviction for any of these offenses has been expunged. I understand these offenses would prohibit me from being approved to provide relative or foster care for a child. This applies to juvenile as well as adult offenses.

K.S.A. 21-3401 Murder in the First Degree
K.S.A. 21-3402 Murder in the Second Degree
K.S.A. 21-3403 Voluntary Manslaughter
K.S.A. 21-3404 Involuntary Manslaughter
K.S.A. 21-3405 Vehicular Homicide
K.S.A. 21-3406 Assisting Suicide
K.S.A. 21-3408 Assault
K.S.A. 21-3409 Assault of a Law Enforcement Officer
K.S.A. 21-3410 Aggravated Assault
K.S.A. 21-3411 Aggravated Assault of a Law Enforcement Officer
K.S.A. 21-3412 Battery
K.S.A. 21-3413 Battery against a Law Enforcement Officer
K.S.A. 21-3414 Aggravated Battery
K.S.A. 21-3415 Aggravated Battery against a Law Enforcement Officer
K.S.A. 21-3416 Unlawful Interference with a Firefighter
K.S.A. 21-3418 Permitting Dangerous Animal to be at Large
K.S.A. 21-3419 Criminal Threat
K.S.A. 21-3419a Aggravated Criminal Threat
K.S.A. 21-3420 Kidnapping
K.S.A. 21-3421 Aggravated Kidnapping
K.S.A. 21-3422 Interference with Parental Custody
K.S.A. 21-3422a Aggravated Interference with Parental Custody
K.S.A. 21-3423 Interference with Custody of a Committed Person
K.S.A. 21-3424 Criminal Restraint
K.S.A. 21-3425 Mistreatment of a Confined Person
K.S.A. 21-3426 Robbery
K.S.A. 21-3427 Aggravated Robbery
K.S.A. 21-3428 Blackmail
K.S.A. 21-3430 Income Tax Returns; Disclosure of Use for Commercial Purposes
K.S.A. 21-3430a Information Obtained in Preparing
K.S.A. 21-3434 Promoting or Permitting Hazing
K.S.A. 21-3435 Exposing Another to a Life Threatening Communicable Disease
K.S.A. 21-3437 Mistreatment of a Dependent Adult
K.S.A. 21-3438 Stalking
K.S.A. 21-3439 Capital Murder
K.S.A. 21-3440 Injury to a Pregnant Woman
Declaration of No Prohibitive Offenses

K.S.A. 21-3441 Injury to a Pregnant Woman by Vehicle
K.S.A. 21-3442 Involuntary Manslaughter While Driving Under the Influence of Alcohol or Drugs
K.S.A. 21-3443 Battery against a School Employee
K.S.A. 21-3502 Rape
K.S.A. 21-3503 Indecent Liberties with a Child
K.S.A. 21-3504 Aggravated Indecent Liberties with a Child
K.S.A. 21-3505 Criminal Sodomy
K.S.A. 21-3506 Aggravated Criminal Sodomy
K.S.A. 21-3507 Adultery
K.S.A. 21-3508 Lewd and Lascivious Behavior
K.S.A. 21-3509 Enticement of a Child
K.S.A. 21-3510 Indecent Solicitation of a Child
K.S.A. 21-3511 Aggravated Indecent Solicitation of a Child
K.S.A. 21-3512 Prostitution
K.S.A. 21-3513 Promoting Prostitution
K.S.A. 21-3515 Patronizing a Prostitute
K.S.A. 21-3516 Sexual Exploitation of a Child
K.S.A. 21-3517 Sexual Battery
K.S.A. 21-3518 Aggravated Sexual Battery
K.S.A. 21-3520 Unlawful Sexual Relations
K.S.A. 21-3601 Bigamy
K.S.A. 21-3602 Incest
K.S.A. 21-3603 Aggravated Incest
K.S.A. 21-3604 Abandonment of a Child
K.S.A. 21-3604a Aggravated Abandonment of a Child
K.S.A. 21-3605 Nonsupport of a Child or Spouse
K.S.A. 21-3608 Endangering a Child
K.S.A. 21-3609 Abuse of a Child
K.S.A. 21-3610 Furnishing Alcoholic Liquor to a Minor
K.S.A. 21-3610a Furnishing Cereal Malt Liquor to a Minor
K.S.A. 21-3610b Furnishing Alcoholic Beverages to a Minor for Illicit Purposes
K.S.A. 21-3611 Aggravated Juvenile Delinquency
K.S.A. 21-3612 Contributing to a Child’s Misconduct or Deprivation
K.S.A. 21-4301 Promoting Obscenity
K.S.A. 21-4301a Promoting Obscenity to Minors

Any felony of a crime of K.S.A. 65-4101 through K.S.A. 65-4175—prohibited drug crimes

________________________________________  __________________________
Name                                                                 Date

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