

Individual Recruitment Plan for Child in Need of an Adoptive Resource

Section 1					
Child Name:		DOB:		FACTS Case#	
Local DCF Office:		Assigned DCF Staff:			
Provider:		Assigned Provider Staff:			
Plan Date:		Period of IRP	From:	To:	
Section 2					
Child's Preparation and Preferences Regarding Adoption:					
Case Planning Team's Recommendations Regarding Adoptive Placement:					
Special Needs and Services To be Addressed in Adoptive Placement					
Strengths the Child Brings to Adoption:					

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Other Factors to Consider

Summary of Progress Made Since Last Plan:

Section 3 Adoption Recruitment Activities

Recruitment Activity	Responsible Person	Target Date	Achieved Date	Outcome
1.				
2.				
3.				
4.				
5.				

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6.				
7.				

Section 4

Are TV, print media, and/or radio recruitment options for the child?

If not, why ?

Special Considerations

Section 5

Signatures:

Case Manager Signature

Date

Supervisor Signature

Date

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