

(Insert letterhead)

Date:

Address:

Dear (name):

Your interest in adopting a child from foster care is appreciated. A Best Interest Staffing was held on (date) to consider your family as an adoptive resource for (name of child). We regret to inform you that the staffing team made the decision to select another family for (name of child). Although the team recognized that you have many positive attributes, they felt the family selected was the best match for this child's strengths and needs.

The Kansas Annotated Statutes, Article 22. of the REVISED KANSAS CODE FOR CARE OF CHILDREN state the following:

38-2270. Custody for adoption. (a) When parental rights have been terminated and it appears that adoption is a viable alternative, the court shall enter one of the following orders:

- (1) An order granting custody of the child, for adoption proceedings, to the secretary or a corporation organized under the laws of the state of Kansas authorized to care for and surrender children for adoption as provided in K.S.A. 38-112 et seq., and amendments thereto. The person, secretary or corporation shall have authority to place the child in a family home, and give consent for the legal adoption of the child which shall be the only consent required to authorize the entry of an order or decree of adoption.
- (2) An order granting custody of the child to proposed adoptive parents and consenting to the adoption of the child by the proposed adoptive parents.
 - (b) In making an order under subsection (a), the court shall give preference, to the extent that the court finds it is in the best interests of the child, first to granting such custody for adoption to a relative of the child and second to granting such custody to a person with whom the child has close emotional ties.
 - (c) Discharge upon adoption. When an adoption decree has been filed with the court in the child in need of care case, the secretary's custody shall cease, the court's jurisdiction over the child shall cease and the court shall enter an order to that effect.

If you have questions or concerns regarding the decision or the Best Interest Staffing process, please feel free to contact the _____ (title) , _____(name) at _____(address) and at _____(phone number) within 5 days from receiving this notification. Contacting this person results in an internal review by a Child Welfare Case Management Provider Independent Reviewer.

We greatly appreciate your interest in being a potential permanent resource for this child.

Sincerely,

(Signature)

