Kansas Department for Children and Families

SUMMARY OF RESULTS OF PRELIMINARY INQUIRY

PPS 1001A
Jul 20

M/DD/YY TIME	TYPE CONTACT	PERSON, TITLE / AGENCY CONTACTED	ADDITIONAL INFORMATION: PRELIMINARY INQUIRY or ANY ADDITIONAL INFORMATION OBTAINED AFTER THE INITIAL REPORT

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Signature of person obtaining additional information

Report Returned from Preliminary Inquiry	
Date:	
Time:	

***Type Contact:**

HI (Home Interview); **M** (Meeting/Case Conference); **OI** (Office Interview); **SI** (School Interview); **Lf** (Letter from); **CMA**(Case Management Activities);

Tt (Telephone to); **TF** (Telephone From); **LT** (Letter To);

Et (E-mail to); **Ef** (E-mail from); **Ft** (Fax to); **Ff** (Fax from);