PARENTAL CONSENT
TO INTERVIEW A CHILD AT SCHOOL

This consent form shall only be used for interviews not included in K.S.A. 38-2226(g).

<table>
<thead>
<tr>
<th>Date:</th>
<th>Event #:</th>
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I (print name) __________________________ give the Kansas Department for Children and Families consent to interview the following child(ren) at school:

<table>
<thead>
<tr>
<th>Names of child(ren):</th>
<th>School:</th>
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______________________________________  
Parent/Caregiver Signature   Date   Time

This consent is valid for 30 days from the date of signature or event closure, whichever occurs first, unless otherwise specified by the parent/caregiver below:

____

Requested by:

DCF Staff:

DCF Office:

Phone #:

Distribution:  □ Parent/Caregiver  □ DCF  □ School

Kansas
Department for Children and Families
Prevention and Protection Services

Strong Families Make a Strong Kansas