

ICPC Preliminary Home Study Report

Child(ren) Name:
Placement Resource Name:
Home Study Type:
Name and Contact of Assigned Worker:
Anticipated Date of Completion:
Sending State:

This preliminary report is sent to you to comply with the Safe and Timely Interstate Placement of Foster Children Act of 2006. This is not considered as an approval or denial for placement. A child cannot be placed on a preliminary report. The following items are incomplete or need further assessment:

- ☐ Background checks are incomplete (please describe what is pending below)
- ☐ Personal references have not been received
- ☐ Licensure is pending (please provide any comments below)
- ☐ Describe any additional identified concerns or delays:

Additional Comments:

Signed:

Date: