

Dear \_\_\_\_\_ :

Re: \_\_\_\_\_, **DOB:** \_\_\_\_\_

\_\_\_\_\_ Federal Adoption Assistance and Child Welfare Act of 1980 (PL. 96-272) requires a court review or administrative review every six months for all children in alternate care placements. The reviews are intended to determine the appropriateness of placement, services needed to meet the special needs of the child, the extent of compliance to case plan, progress toward obtaining a permanent placement, the appropriateness of the plan and the circumstances which prevent the child from being placed for adoption.

\_\_\_\_\_ According to Wisconsin State Law we must notify you as the TRIBAL REPRESENTATIVE appointed at the time of termination, even if this appointment currently is not in effect.

This is to \_\_\_\_\_ notify you that we will conduct an administrative review for \_\_\_\_\_ at \_\_\_\_\_ on \_\_\_\_\_ at \_\_\_\_\_. The review will last approximately 15 minutes. Although it is not mandatory for you to attend, you are always welcome to participate.

The panel will be reviewing the following:

1. The continuing necessity for and the appropriateness of the placement.
2. The extent of compliance with the permanency plan by the agency and other service providers, the child's caretakers and the child.
3. The extent of any efforts to involve appropriate service providers in addition to the agency's staff in planning to meet the special needs of the child.
4. The date by which it is likely that the child will be placed for adoption, adopted, or otherwise permanently placed.

Attached is an outline of these issues with spaces for your comments as well as for general remarks. Please feel free to use this form and add any pages you wish.

You are invited to submit written comments not less than 10 working days before the review. Your comments will be reviewed by panel members and may be included in the Administrative Review Report.

Please return the enclosed form to \_\_\_\_\_ no less than 10 days prior to the scheduled hearing indicating whether you plan to attend the Administrative Review.

Sincerely,

Adoption and Consultation Unit  
Division of Children and Family Services

Attachment

**PERMANENCY PLAN / ADMINISTRATIVE REVIEW  
ADOPTION AND CONSULTATION UNIT**

Name - Child (Last, First, MI)

Date - Scheduled Administrative Review

Yes  No Do you plan to attend the Administrative Review on \_\_\_\_\_ ?

Current Permanency Plan

Adoption 



**COMMENTS ON ISSUES TO BE REVIEWED**

Please comment on the continuing necessity for and appropriateness of the present placement.



Please comment on the extent of compliance with the case permanency plan by the agency and other service providers, the child and the child's caretakers.



Please comment on the extent of any efforts to involve appropriate service providers in addition to the agency's staff in planning to meet the special need(s) of the child.

Please comment on the date by which it is likely that the child will be placed for adoption, adopted, or otherwise permanently placed, discuss any barriers.

Other comments or areas for discussion:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date Signed

**Please return to \_\_\_\_\_ within 10 working days prior to review date with any additional comments.**

Adoption and Consultation Unit  
Division of Children and Family Services

