

# Permanency Plan - TPR / Guardianship

The Honorable Judge

Name - Child (Last, First, MI)		Birthdate - Child	
TPR Date	Last ARB Review Date (mm/dd/yyyy)	Court Number	
 Agent Provider		Provider Address	

As the guardianship agency for \_\_\_\_\_, whose parent's rights have been terminated, we are referring this case to the court for a permanency plan hearing. As required under s. 48.38(5m)(a), Stats., we are submitting the following information.

**Describe The Child's Current Adjustment Needs And Progress (Within The Family / Facility, Peer Group And Community).**

**Continued Necessity For And Appropriateness Of Placement**

**Extent Of Compliance With Permanent Plan By The Agency And The Children**

**Services Provided Outside The Agency To Meet The Special Needs Of The Children**

**V. Progress Towards Obtaining A Permanent Home For The Children**

**VI. Date Permanent Plan / Adoption Is Likely To Be Achieved**

**VII. Appropriateness Of The Permanent Plan And Circumstances Which Prevent Adoption Or Sustaining Care**

**VIII. Date Of And Recommendation Of Last Permanency Plan Review Panel**

**IX. Recommendation Of Guardianship Agency**

**X. Signatures**

Name - Worker

**SIGNATURE** - Worker

Date Signed

Name - Supervisor

**SIGNATURE** - Supervisor

Date Signed