

ADOPTIVE PLACEMENT CHECKLIST CHILD PLACING AGENCY – INTERNATIONAL

Use of form: Use of this form is voluntary. However, use as a review document by child placing agencies (CPAs) will help ensure compliance with adoptive placement records under Wisconsin Statute 48 Children's Code and Wisconsin Administrative Code chapters HFS 37 Information to be Provided to Foster Parents, HFS 54 Child Placing Agencies and HFS 56 Foster Home Care for Children. Note: As of November 1, 2008, the prefix for these administrative rules has been changed from HFS to DCF. Licensing specialists may also use this form during monitoring visits to document compliance with these rules. Personally identifiable information gathered on this form will only be used to verify compliance with licensing rules.

Instructions: Review the facility's adoptive placement records and place a check or date in the box under the child's name to indicate compliance. Write "N/A" if an item is not applicable.

Name – Child Placing Agency	Facility ID Number
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Address – Child Placing Agency (Street, City, State, Zip Code)
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Name – Licensing Specialist	Date – Records Review
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A. Child / Birth Parent Records

1. Name of child				
2. Birthdate 54.06(2)(a)2.a.				
3. Referral information / Vital statistics 54.06(2)(a)2.a.				
4. Copy of TPR order / guardianship transfer 48.839(2); 54.01(3m)				
5. <input type="checkbox"/> Yes or <input type="checkbox"/> No Finalized in sending country?				
6. Foreign adoption bond or ICPC 48.839(1)(a); 54.01(3m)				
7. Date of placement 54.06(2)(a)2.a.				
8. School reports (if applicable) 54.06(2)(a)2.e.				
9. Case notes and / or treatment plan showing progress of child and family 54.06(2)(a)2.f.				
10. Date – medical exam 54.04(2)(c); 56.09(4)(a)				
11. Date – dental exam (if over 3 years of age) 54.04(2)(f)1. and 2.; 56.09(4)(a) and (e)				
12. Record of immunizations 54.04(2)(c)2.; 56.09(11)(a)7.				
13. Medical records (if applicable) 54.04(2)(i)				
14. Social, emotional and environmental history of the child 54.04(2)(i)5.				
15. Signed consent for emergency surgical care 54.04(1)(b)4.				
16. Signed consent for immunizations 54.04(1)(b)4.				
17. Signed consent for routine medical exams and treatment 54.04(1)(b)4.				

B. Adoptive Family Records

1. Name of adoptive family				
2. Adoption application 54.04(1)(f)7.				
3. Adoptive home study (including CBC) 54.04(1)(g)11.				
4. Home study updates (per agency policy) 54.02(2)(d)1.a.				

B. Adoptive Family Records (continued)

5.	Fee agreement (per agency policy) 54.02(2)(d)1.a.				
6.	Adoptive Parent Agreement 54.04(1)(f)7.				
7.	Post-placement services 54.04(1)(g)10.				
8.	Order of Adoption 48.91(3); 54.01(3m)				

C. Foster Home Licensing (if required) (e.g., IR-4s)

1.	BID forms 54.01(3m); 56.05(1)(f)1.				
2.	CBC results 54.01(3m); 56.05(1)(f)4.				
3.	IBIS results 54.01(3m); 56.05(1)(f)4.				
4.	Results of check with local law enforcement per info on BID (if applicable) 54.01(3m); 56.05(1)(f)4.				
5.	Foster home assessment study or evaluation 54.04(1)(f)2.;56.05(1)(b)				
6.	Foster home licensing compliance study or survey (CFS-787 optional form) 54.04(1)(f)2.				
7.	Current foster home license certificate 54.04(1)(f)2.; 56.04(5)(a)				
8.	Verification of property and vehicle insurance or waiver 56.04(4)(a)2. and (4)(b)2.; 56.05(3)(a) and (4)(b)				
9.	Health exam for all in household 56.04(4)(a)3. and (4)(b)5.; 56.05(1)(e)2.				
10.	References from 3 non-relatives 56.04(4)(a)4.				
11.	Fire inspection (if required by CPA) 56.04(4)(a)5. and (b)3.				
12.	Water test (if required by CPA) 56.04(4)(a)6. and (b)4.				
13.	Employment history of applicant 5 years prior to application 56.04(4)(a)7.				
14.	Notification of any previous licensure as a foster parent or any other type of caregiver for children, the name of the licensing agency and the period during which the license was held 56.04(4)(a)8.				
15.	Licensing modification application (if applicable) 56.04(4)(c)2.				
16.	Written approval to combine the case of foster children with regular part-time care of other non-related children or adults or to conduct business or provide services in the foster home (if applicable) 56.09(2)(a)				
17.	Information for Foster Parents, forms CFS-872A and 872B (mandatory forms) HFS 37; 54.01(3m).				
18.	Pre-adoptive placement training 48.84; 54.01(3m).				
19.	Fingerprint check 54.01(3m)				
20.	Child abuse or neglect registry check 54.01(3m)				