**DEPARTMENT OF CHILDREN AND FAMILIES**

Division of Safety and Permanence

**Foster Home Licensure Notification**

**Use of form:** Foster home licensing agencies are required to notify school districts when a foster home is licensed pursuant to s. 48.62(3), Wis. Stats. Use of this form is voluntary; however, the information must be provided. Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m), Wisconsin Statutes].

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| --- | --- | --- |
| DATE: |  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| TO: |  |  |
|  | Name – School District |  |

|  |  |  |
| --- | --- | --- |
| FROM |  |  |
|  | Name – Licensing Agency Representative |  |
|  |  |  |
|  | Title |  |
|  |  |  |
|  | Name – Licensing Agency |  |

RE: Licensure of a Foster Home in the School District

This is to alert you, pursuant to s. 48.62(3), Wis. Stats., that the above-named agency has licensed a foster home in your school district.

The foster home has been licensed for the period of       (mm/dd/yyyy) through       (mm/dd/yyyy).

This foster home has been licensed to provide care and maintenance for up to    children, ages    through   .

The name(s) of the foster parent(s) is / are       and they reside at       (street, city, state, zip code).

The telephone number of the foster home is      .

Contact me at the agency address / telephone number listed below if you have questions regarding this notification.

|  |  |  |
| --- | --- | --- |
|  | |  |
| Name – Licensing Agency Representative | |  |
|  |
| Agency – Street Address | |
|  | |
| City, State, Zip Code | |
|  |  |
| Telephone Number |

Copy: Foster Parent(s)