**DEPARTMENT OF CHILDREN AND FAMILIES**

Division of Milwaukee Child Protective Services

**Request for Approval of Foster Care Maintenance Rate Over $2,000 per Month**

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m), Wisconsin Statutes].

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| **This section is to be completed by the child placement agency (CPA).** | | | | | | | | | | |
| Name – Child Placement Agency | | | | | | | | | | |
| Address – Child Placement Agency | | | | | | | | | | |
| Name – Child Placement Agency Contact | | | | | | | | Telephone Number – Child Placement Agency Contact | | |
| New request  Continuation / renewal of current rate | | | | | | | | | | |
| Name – Child | | | | | | | Birthdate – Child | | | eWiSACWIS Number |
| **Foster Home Information** | | | | | | | | | | |
| Name – Provider | | | | | | | | | | |
| Address – Provider (Street, City, Zip Code) | | | | | | | | | | |
| **Adjusted Rate Information** | | | | | | | | | | |
| Date – Requested Rate Increase Starts | | | Current Monthly Maintenance Rate  $ | | | | | | Requested Monthly Maintenance Rate  $ | |
| Justification for rate increase. **(Include itemization of additional monthly expenses. Attach separate sheet if necessary.)** | | | | | | | | | | |
| **SIGNATURE** – Authorized CPA | | | | | | | | | Date Signed | |
| **This section is to be completed by the Ongoing Case Management (lead) Agency.** | | | | | | | | | | |
| Recommended Monthly Maintenance Rate  $ | | | | Recommended Effective Date | | | | | | |
| Any additional justification | | | | | | | | | | |
| Recommended by: | **SIGNATURE** – Program Manager | | | | | | | | Date Signed | |
|  | **Print Name** – Program Manager | | | | Name – Agency | | | | | |
| **This section is to be completed by Division of Milwaukee Child Protective Services Fiscal PEM** | | | | | | | | | | |
| Date – Request Received | | Date – Rate Increase Approved | | | | Date – Ongoing Agency Notified | | | | **PEM Initials** |
| **NOTE TO LEAD AGENCY:** **The rate should be changed in eWiSACWIS *only* when you receive notice that the maintenance rate increase has been approved by the Division of Milwaukee Child Protective Services.** | | | | | | | | | | |