DEPARTMENT OF CHILDREN AND FAMILIES
Division of Safety and Permanence

Kinship Care Payment Termination Notice

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

Today's Date: _____

TO: _____
Name – Child Support Agency

FROM: _____ _____
Name – Person Completing Form Name – Child Welfare Agency

This notice is to inform you that effective _____, the child(ren) named below is / are no longer receiving a Kinship Care payment.
(mm/dd/yyyy)

I CHILD(REN) INFORMATION

Name (Last, First, MI)	Birthdate (mm/dd/yyyy)	Social Security Number

II REASON(S) PAYMENT(S) TERMINATED

- ☐ No need for living arrangement
- ☐ No probability for court jurisdiction
- ☐ Child no longer living in relative caregiver's home
- ☐ Child receiving SSI
- ☐ Not in child's best interest
- ☐ Relative caregiver refused to cooperate with agency
- ☐ Child turned 18 years of age
- ☐ Child deceased
- ☐ Relative caregiver failed criminal background check
- ☐ Other household member failed criminal background check
- ☐ Relative caregiver voluntarily closed case
- ☐ Child's parent(s) living with child
- ☐ Other – Check if none of the other primary reasons are appropriate

III PARENT INFORMATION

Father A separate form must be used for children with different fathers.

Name (Last, First, MI)		Birthdate (mm/dd/yyyy)		Social Security Number
Street Address	City	State	Zip Code	Telephone Number – Home

Mother A separate form must be used for children with different mothers.

Name (Last, First, MI)		Birthdate (mm/dd/yyyy)		Social Security Number
Street Address	City	State	Zip Code	Telephone Number – Home

IV CHILD(REN) RESIDENCE

Child(ren) currently reside(s) with: ☐ Mother ☐ Father ☐ Both ☐ Unknown ☐ Other
If "Other", provide the information requested below (if known).

Name (Last, First, MI)		Birthdate (mm/dd/yyyy)		Social Security Number
Street Address	City	State	Zip Code	Telephone Number – Home

Relationship to Child(ren)

NOTE: DO NOT send this form to the Department of Children and Families. It should be sent to the local child support agency.