**MDT Case Submission Template**

**Staffing Request:** [ ] Weekly Staffing [ ] Monthly Case Review

**Previously Staffed:** [ ] Yes [ ] No If yes, date of staffing:

**Index Child (name/DOB)**:

**Mother**:

**Father:**

**Sibling(s)**:

**Other collaterals:**

**Alleged Maltreater(s)**:

**MDT Partner Involvement**

[ ]  **Law Enforcement:**

[ ]  **District Attorney’s Office:**

[ ]  **Child Protective Services:**

[ ]  **Medical:**

[ ] **Schools:**

[ ] **Advocacy:**

[ ] **Other:**

**Photos to be shared:** [ ]  Yes [ ]  No

**Cultural & Spiritual Considerations:**
(I.e. language preferences, gender identity information, spiritual considerations, etc.) **Case Submitted By:**

**Summary of Concerns:**

**Goal / Purpose of Staffing:**

Please identify **why this case is being brought forth for an MDT**.
Consider the following questions:

* What information are you hoping to learn?
* What information would you like to make partners aware of?
* What question(s) would you like MDT partners to answer?
* What protocol/process/system concerns have been identified?
* Are there notable trends?