

INSTRUCTIONS

CFS-223-T1 Child Maltreatment True Investigative Determination Notice to Underaged Juvenile Offender (under 14 years old)

Purpose:

To notify an alleged underaged juvenile offender of a true child maltreatment investigative determination regarding said juvenile per A.C.A. 12-18-703.

Completion:

To: Enter the name of the alleged underaged juvenile offender.

Address: Enter the full address of the alleged underaged juvenile offender.

From: Enter the name of the DCFS staff sending the notice.

Address: Enter the full address of the DCFS staff sending the notice.

Phone: Enter the phone number of the DCFS staff sending the notice.

County of Referral: Enter the county that the case was referred to.

Primary Assigned County: Enter the county of primary assignment.

Date: Enter the date the notice is sent.

CHRIS Referral #: Insert the CHRIS referral number.

Name of Underaged Juvenile Offender: Enter the name of the alleged juvenile offender.

Name of Victim: Enter the name of the victim involved in the report.

Date of Allegation: Enter the allegation date.

Date of Report: Enter the report date.

Allegation: Insert a brief description of the suspected child maltreatment.

Supportive and/or Protective Services Options: Select boxes as appropriate for the particular case.

Signature: Print and sign the name of the staff member who is sending the form.

Mailed by: Write in the name of the DCFS Central Office Notification Unit staff who is mailing the form.

Routing:

1. Send a copy to the alleged underaged juvenile offender within 10 business days of determination.
2. Retain a file copy.