



Arkansas Department of Human Services
Division of Children and Family Services

Child Maltreatment True Investigative Determination Notice
to School Where Victim Is Enrolled

To: _____

Address: _____

From: _____

Phone: _____

County of Referral: _____ Primary Assigned County: _____

Date: _____ CHRIS Referral # _____

Re: Name of Alleged Victim(s): _____

The Division of Children and Family Services or Arkansas State Police Crimes Against Children Division
received an allegation of suspected child maltreatment involving the above named child(ren). The incident was
reported on _____.

The type of maltreatment was _____.

Pursuant to Arkansas Code Ann. §12-18-708, this is your notice that:

- Based on the preponderance of the evidence, the investigative agency determined the allegation to be true,
and the offender's name should be placed in the Child Maltreatment Central Registry.
Based on the preponderance of the evidence, the investigative agency determined the allegation to be true,
but exempt, and the offender's name should not be placed in the Child Maltreatment Central Registry.

Until the person identified as the alleged offender receives due process as to the agency action, the alleged
offender's name will not be placed on the child maltreatment registry and we cannot share the identity of alleged
offender with you, nor disclose the relationship between the alleged offender and the victim or whether services
have been offered and provided.

DCFS INVESTIGATOR PRINTED NAME

MAILED BY