



Arkansas Department of Human Services
Division of Children and Family Services

Notice of Unsubstantiated Child Maltreatment Investigative Determination
Law Enforcement Prosecuting Attorney

To: \_\_\_\_\_

Address: \_\_\_\_\_

From: \_\_\_\_\_

Phone: \_\_\_\_\_

County of Referral: \_\_\_\_\_ Primary Assigned County: \_\_\_\_\_

Date: \_\_\_\_\_ CHRIS Referral # \_\_\_\_\_

RE: Name of Alleged Victim(s): \_\_\_\_\_

Name of Alleged Offender: \_\_\_\_\_

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

Pursuant to Arkansas Code Ann. §12-18-708, this is your notice that because the allegation was not supported by a preponderance of the evidence, the allegation has been determined to be unsubstantiated, and the offender's name will not be placed in the Child Maltreatment Central Registry.

The type of alleged maltreatment was \_\_\_\_\_.

DCFS INVESTIGATOR PRINTED NAME

MAILED BY