



Arkansas Department of Human Services
Division of Children and Family Services

Notice of Unsubstantiated Child Maltreatment Investigative Determination to

Attorney Ad Litem CASA of Child in Foster Home Where Maltreatment Is Reported

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

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

\_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

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

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

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

RE: Name of Child(ren) represented by AAL or CASA: \_\_\_\_\_

The Division of Children and Family Services or Arkansas State Police Crimes Against Children Division received an allegation of suspected child maltreatment involving the foster home where the above named person is in foster care. The incident was reported on (date) \_\_\_\_\_ .

Pursuant to Arkansas Code Ann. §12-18-708, this is your notice or confirmation that because the allegation was not supported by a preponderance of evidence, the allegation has been found 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