



Arkansas Department of Human Services
Division of Children and Family Services

Notice of Overturned True 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 in Foster Home Where Alleged Maltreatment Occurred:

\_\_\_\_\_

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

This is your notice that the original true finding has been overturned on appeal by an administrative law judge, 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