



Division of Children and Family Services

P.O. Box 1437, Slot S560 · Little Rock, AR 72203-1437
501-682-8772 · Fax: 501-682-6968 · TDD: 501-682-1442



Date: _____

Name of Foster / Adoptive Home Applicant (s): _____

Address: _____

Dear: _____

It has been determined by the Division of Children and Family Services (DCFS) that your home does not meet the standards or other criteria of a DCFS foster or adoptive home due to:

Results of a Background Check deem one of the applicants or other household members ineligible

Results of the In-Home Consultation Visit

Results of the Home Study

Other Comments: _____

As such, DCFS must deny your foster / adoptive home application and approval.

Thank you for your interest in fostering / adopting for the State of Arkansas. We wish you the best in your future service endeavors.

Respectfully,

Family Service Worker Name

Family Service Worker Supervisor

Family Service Worker Signature

Family Service Worker Supervisor Signature