



DEPARTMENT OF CHILDREN, YOUTH, AND FAMILIES (DCYF)

Caregiver's Report to the Court

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| CHILD'S NAME | LEGAL CASE NUMBER |
| HEARING DATE | COUNTY WITH LEGAL JURISDICTION |
| CAREGIVER NAME/PERSON PROVIDING INFORMATION | CHILD'S ASSIGNED CASE WORKER |

Please return Caregiver Report Form (via email, US Postal Service or in person) to the child's assigned CASE worker and/or guardian ad litem.

TOPICS

1. Child's strengths, hobbies, gifts, talents, participation in extra-curricular activities/events

2. Child's social interaction with caregiver family, peers and siblings

3. Child's school progress and adjustment

4. Child's physical health (state results of medical and dental appointments)

5. Child's emotional health and well-being (counselor or therapist appointment schedule):

6. Child's adjustment to caregiver family and caregiver family expectations:

7. Child's visits with parent(s) and sibling(s):

8. Your view on the needs of the child:

9. Your thoughts on how these needs can be addressed:

10. Your thoughts on Department's case plan:

11. Other child/case specific information you wish the court to consider:

CAREGIVER'S PRINTED NAME

CAREGIVER'S SIGNATURE

DATE SIGNED

