



CONSULATE / EMBASSY NOTIFICATION

State Form 55676 (R3 / 7-19)
DEPARTMENT OF CHILD SERVICES

INSTRUCTIONS: This form must be completed by the Family Case Manager (FCM) immediately after a child believed to be a foreign national (born in a country other than the United States of America) or a **dual national** (eligible for foreign nationality as the biological child of a foreign national) has been detained by the Department of Child Services (DCS). The FCM must give this form to the DCS Staff Attorney who will then review and send the completed form by fax to number (317) 232-1312 or e-mail to the DCS International and Cultural Affairs (ICA) Liaison. The ICA Liaison will be responsible for transmitting the completed form to the appropriate Consulate or Embassy.

Today's date (month, day, year)	Foreign country of notification	Type of notification <input type="checkbox"/> Detention <input type="checkbox"/> Guardianship <input type="checkbox"/> Termination of Parental Rights
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CHILD INFORMATION

MaGIK case number	Last Name	First Name
Date of birth (month, day, year)	Place of birth (city, principal subdivision (province, state, or county) and country)	
This child is currently under the supervision of the Indiana Department of Child Services.		
Date protective custody began (month, day, year)	County of petition	Date petition filed (month, day, year)

PARENT INFORMATION

Name of mother		
Date of birth (month, day, year)	Place of birth (city, principal subdivision (province, state, or county) and country)	
Address of mother (number and street, city, principal subdivision (province, state, or county), postal code, and full country name)		
Mother's contact information:		
<input type="checkbox"/> E-mail address	<input type="checkbox"/> Telephone number	<input type="checkbox"/> Skype user name or number
<input type="checkbox"/> What's App number	<input type="checkbox"/> Other	
Mother in jail / prison <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, where	Current Immigration and Customs Enforcement (ICE) hold <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of father		
Date of birth (month, day, year)	Place of birth (city, principal subdivision (province, state, or county) and country)	
Address of father (number and street, city, principal subdivision (province, state, or county), postal code, and full country name)		
Father's contact information:		
<input type="checkbox"/> E-mail address	<input type="checkbox"/> Telephone number	<input type="checkbox"/> Skype user name or number
<input type="checkbox"/> What's App number	<input type="checkbox"/> Other	
Father in jail / prison <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, where	Current Immigration and Customs Enforcement (ICE) hold <input type="checkbox"/> Yes <input type="checkbox"/> No
Other (refugee, visa, etc.)		

If you have questions, please contact the International and Cultural Affairs Liaison at InternationalandCulturalAffairs@dcs.in.gov.