



PROFESSIONAL SERVICE REQUEST (PSR) REPORT

State Form 57089 (R / 12-21)
DEPARTMENT OF CHILD SERVICES

INSTRUCTIONS:

The assigned Family Case Manager (FCM) should document details of the PSR on this form and upload the completed form to the case management system. See Indiana Department of Child Services (DCS) policies 3.01 Receiving Calls, 3.03 Service Request Intake Reports, and 4.48 Professional Service Requests for additional guidance.

Name(s) of legal parent, guardian, or custodian / caregiver	
Name(s) of child(ren)	
Case management system identification number	Name of requestor

PSR REQUEST

What specifically is being requested?

SUMMARY OF PSR

What was the outcome of the specific request?