



NOTICE TO PARENT, GUARDIAN, OR CUSTODIAN OF INTERVIEW WITH CHILD

State Form 53130 (3-07) / CW 2129
DEPARTMENT OF CHILD SERVICES

To: _____ _____ _____	Date (month, day, year): _____
	Time: _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.

You are hereby given notice that on _____ at _____ a.m. / p.m.,
 (Date) (Time)
 your child, _____ was interviewed
 (Name of child)
 at _____ by a Family Case Manager from the
 (Location)
 _____ County Department of Child Services. This interview occurred following receipt of a report that your child may have been the victim of child abuse or neglect, may have been a perpetrator of child abuse or neglect, or may have been a witness to abuse or neglect of another child.

(Check one of the following circumstances listed below:)

The following unsuccessful attempts were made to reach you prior to the interview to obtain your consent and also to reach you since the interview to inform you of the action:

OR

Due to the seriousness of the report, the Department of Child Services was required to interview this child in order to assure the immediate safety of this child or another pursuant to IC 31-33-8-1 and IC 31-33-8-6 of the Indiana juvenile law. We were unable to contact you before the interview to inform you of the circumstances and necessary action.

It is necessary that I, as the Family Case Manager, talk to you as soon as possible.

Please call me at (_____) _____ on _____ , _____ ,
 (Telephone) (Day) (Date)
 at _____ a.m. / p.m.
 (Time)

Please come to my office at the Department of Child Services on _____ , _____ ,
 (Day) (Date)
 at _____ a.m. / p.m.
 (Time)

The Department address is: _____ .

Name of family case manager <i>(please print)</i>	
Signature of family case manager	County Department of Child Services