

Larimer County Foster/ Kinship Parent Notes (Monthly)

Month/Year: _____

Name of Foster/ Kinship Parent: _____

Name of Child /Youth: _____

Name of FC Consultant/ Kinship Specialist: _____

Name of Child's Caseworker: _____

Instructions: The purpose of foster/kinship parent notes is to document successes, accomplishments and areas of concern in major areas of the foster/kinship child's placement. Please be specific in your documentation. Complete this template and submit a copy to your child's caseworker and a separate copy to your foster care consultant/ kinship specialist every month. These notes are intended to be FACTUAL record of activities and observations involving the child. Therefore, they should NOT be used to express subjective opinions about the child's case plan or your family's fostering experience. For those purposes we would encourage you to contact your Foster Care Consultant or Kinship Specialist for suggestions. Remember, Foster/ Kinship Parent notes become a PERMANENT part of the child's file.

Date of last Face to Face contact with Child Caseworker: _____

Date of last Face to Face contact with Foster/Kin Staff: _____

Date Received Completed FSP: _____ Date Reviewed Assessment Tool: _____

Education / Academic Progress:

Emotional and Behavioral Progress:

Physical/ Medical Progress:

Family and Community Connections Update:

Independent Living/ Emancipation Planning Update (if applicable):

Other:



DEPARTMENT OF HUMAN SERVICES

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