



**NOTICE A CHILD CARE WORKER (CCW) ASSESSMENT
REVIEW DECISION FOR AN ASSESSMENT CLOSED
PRIOR TO OCTOBER 15, 2006**

State Form 53032 (12-21)
DEPARTMENT OF CHILD SERVICES

*INSTRUCTIONS: The Department of Child Services (DCS) employee who conducted the courtesy review will use this form **only** for allegations substantiated prior to October 15, 2006, to notify a Child Care Worker (CCW) perpetrator of the results of agency review completed as a courtesy after a CCW perpetrator requested agency review of the decision to substantiate. Attach a copy of the approved redacted [Assessment of Child Abuse and/or Neglected \(SF 113\) \(311\)](#), and mail or hand-deliver the documents to the CCW. See policy [2.03 Child Care Workers Assessment Review Process](#) for additional information.*

This form was <input type="checkbox"/> mailed <input type="checkbox"/> hand-delivered on: _____ <i>(month, day, year)</i>
Address where form was mailed or hand-delivered to the CWW <i>(number and street, city, state, and ZIP code)</i>

You have:

1. Been identified to be a CCW as defined by DCS Policy, and
2. Allegations substantiated against you which identified you as a perpetrator of CA/N in an assessment that was closed prior to October 15th, 2006, and
3. Requested a review of the decision to substantiate in _____.
Assessment number

This letter is to inform you of the outcome of the courtesy review. A summary of the DCS decision concerning the allegations is attached as [Assessment of Alleged Child Abuse or Neglect \(SF 113\) \(311\)](#)

The Indiana DCS in _____, located at _____,
Local county office name *Address of local county office (number and street, city, state, and ZIP*

classified Child Abuse and/or Neglect (CA/N) allegations as substantiated in _____,
Assessment number *Legacy number*

approved on _____ against:
Date of approval (month, day, year)

Name of alleged perpetrator

Address of alleged perpetrator (number and street, city, state, and ZIP code)

As a result of the courtesy review of this assessment, the department has determined that the substantiations remaining against you, if any, for this assessment are as follows:

ALLEGATION(S) currently substantiated	VICTIM <i>(Insert initials of victim(s) or "NONE" for each allegation)</i>
Physical Abuse	
Sexual Abuse	
Neglect	

As this was a courtesy review, you have no right to an administrative appeal.

Printed name and title of the DCS employee who conducted the courtesy review
Signature of the of the DCS employee