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|  | **Tennessee Department of Children’s Services**  **Public Agency ICPC Home Study Request Checklist**  ***Interstate Compact on the Placement of Children (ICPC)*** |

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| Child's Name: |  | Date of Birth: |  |

This checklist guides Tennessee (TN) DCS caseworkers and contract agency caseworkers when submitting a request for a home study/placement under ICPC Regulations 1, 2, or 7. ICPC requests must be submitted to the TN ICPC team by uploading the ICPC packet in the ICPC instance in the CCWIS/NEICE system AND emailing the packet to [***tnicpc.ei-dcs@tn.gov***](mailto:tnicpc.ei-dcs@tn.gov).

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|  | **Reg 2** | **Reg 2** | **Reg 2** | **Reg 7** | **Reg 1** |
| ***Note***: If the sending agency is seeking a home study on more than one out-of-state resource, please create a separate request packet specific to each request. A separate ICPC instance must be created in CCWIS/NEICE for each home study request. All documentation must be legible. | Parent/Relative  Home Study | Foster Home Study | Adoptive Home Study | Expedited Home Study (Relative) | Intact Family Relocation |
| **Forms:** One for each child, created and uploaded to CCWIS/NEICE ICPC instance separate from the packet. | | | | | |
| * **ICPC 100A Form CS-0525** |  |  |  |  |  |
| * **ICPC 100B Form CS-0523** |  |  |  |  |  |
| **Request Packet**: Assemble one packet for each home study request; scan and save as a single PDF; upload to the case as Document Type: “INITIAL HOME STUDY REQUEST PACKET PART 01,” add “PART 02” only if a single file exceeds 30 MB. | | | | | |
| * *Cover Letter Requesting ICPC* (signed by caseworker and supervisor) |  |  |  |  |  |
| * **Court Order(s). *See next page for additional details.*** | | | | | |
| * Dated within the last twelve (12) months and signed by judge; must clearly establish State of Tennessee custody |  |  |  |  |  |
| * Expedited Order of Compliance, dated within three (3) business days of submission (signed by Judge) |  |  |  |  |  |
| * Termination of Parental Rights, Surrender(s), and/or death certificate |  |  |  |  |  |
| * Financial Medial Plan (1 per child). Form **CS-0795** |  |  |  |  |  |
| * Child Welfare Benefits Summary (1 per child). Form **CS-0508** * TFACTS Health Summary (Immunizations/Prescriptions) |  |  |  |  |  |
| * Detailed Child Summary (1 per child). CANS and CFTM narrative dated within six months. Include assessments if applicable. |  |  |  |  |  |
| * Family Permanency Plan dated within 1 year. |  |  |  |  |  |
| * Education Passport and School Enrollment Letter (include records) |  |  |  |  |  |
| * Child(ren)’s birth certificate(s) |  |  |  |  |  |
| * Child(ren)’s Social Security card(s) |  |  |  |  |  |
| * Sending Agency’s Case Manager Signed Statement ICPC Regulation No. 2 Form **CS-0958** |  |  |  |  |  |
| * Regulation 7 Combined Form signed by caseworker and supervisor. Form **CS-0563 (also used for border agreements)** |  |  |  |  |  |
| * Progress for last six months (case recordings or CFTM summary). |  |  |  |  |  |
| * Initial, approved home study and current reauthorization narrative, if applicable |  |  |  |  |  |
| * Current certificate/approval to board children (foster only) |  |  |  |  |  |
| * Proof of paternity – many states require court order or DNA testing for placement with father or unlicensed paternal relative. Contact TN ICPC at [***tnicpc.ei-dcs@tn.gov***](mailto:tnicpc.ei-dcs@tn.gov) with questions. | **May be required** |  |  | **May be required** |  |