

**ON A SEPARATE WORD DOCUMENT**  
**PLEASE TYPE ALL INFORMATION REQUIRED**

MOTHER FULL NAME, DOB, AGE  
FATHER FULL NAME, DOB, AGE  
CURRENT RESIDENTIAL ADDRESS  
CONTACT PHONE NUMBERS (CELL/HOME)  
EMAIL ADDRESSES

CHILDRENS FULL NAME, DOB, AGE

- 1.
- 2.

CPS INVESTIGATOR NAME(S)  
CONTACT PHONE NUMBER(S)

ALLEGATIONS-Who are they against & allegations

**REQUIREMENT:** We will need typed out document in your own words explaining how CPS became involved. It would be a **timeline** explaining the dates and events involving CPS. It can be a summary or bullet point description. Be as detailed as possible when typing out the document: who, what, when, where, why and how.

Example:

January

- 1/1/2017 – note details who you spoke to and the issue it was regarding, incident
- 1/2/2017 – note details on this day, what occurred, who you spoke to

February

- 2/1/2017 – note details on this day, what occurred, who you spoke to
- 2/2/2017 – note details on this day, what occurred, who you spoke to

**IN ADDITION:** Please be sure to bring any CPS documents that you may have in your possession (SAFETY PLAN, PCSP ASSESSMENT, FAMILY TEAM MEETING OR CONFERENCE). If they did not provide you any documentation, please list any information of who you spoke with on the timeline. Be as detailed as possible. Additional documents, if any, medical records or testing results. If there is a current case open, the recent documents from court and case number.

**PLEASE NOTE:** Additional people or family members are not allowed during the time of your consultation. We also ask that you make any necessary arrangements for child care. If you are unable to make child care arrangements, please contact our office to reschedule for a convenient time.