

### PLACEMENT INTERRUPTION ACTIVITY LOG

**Please Note: Foster Parents must inform the Foster Care Caseworker when a child is out of their home**

<b>CHILD'S NAME</b>		<b>DOB</b>	<b>CHILD SACWIS CASE ID</b>	<b>PROVIDER CASE ID</b>
<b>DATE OF LEAVE</b>	<b>DATE OF RETURN</b>	<b>LOCATION OF CHILD DURING LEAVE (if known)</b>		<b>PROVIDER NAME</b>
<b>REASON FOR INTERRUPTION</b>				
<ul style="list-style-type: none"> <li>• <i>Involvement of Foster Parents with the child during the leave, must be tracked during the time they are away from the foster home.</i></li> <li>• <i>The Foster Care Caseworker worker will sign and submit this form upon the child's return to the foster home.</i></li> <li>• <i>Foster Parents will be paid for up to 14 days of interruption (depending on the location and reason) ONLY if involved with activities for that child, and ONLY if the plan is for the child to return to the same placement. Consideration for this will be made based upon the information documented on this form.</i></li> </ul>				
<b>CHILD-RELATED EVENT &amp; REASON</b>				
<b>DATE &amp; TIME</b>	<b>LOCATION/FACILITY NAME</b>	<b>CONTACT PERSON</b>		<b>CONTACT PERSON'S SIGNATURE</b>
<b>CHILD-RELATED EVENT &amp; REASON</b>				
<b>DATE &amp; TIME</b>	<b>LOCATION/FACILITY NAME</b>	<b>CONTACT PERSON</b>		<b>CONTACT PERSON'S SIGNATURE</b>
<b>CHILD-RELATED EVENT &amp; REASON</b>				
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#### REQUIRED SIGNATURES

<b>FOSTER PARENT'S SIGNATURE</b>	<b>DATE</b>	<b>FOSTER CARE CASEWORKER'S SIGNATURE</b>	<b>DATE</b>
<b>FOSTER CARE SUPERVISOR'S SIGNATURE</b>	<b>DATE</b>	<b>MANAGER'S SIGNATURE</b>	<b>DATE</b>