

# COUNTY OF CHATHAM

CHATHAM COUNTY DEPARTMENT  
OF SOCIAL SERVICES

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Pittsboro, NC 27312  
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Jennie Kristiansen  
Director

Social Services Board

## Placement Provider Notification

Child's Name: [Click to enter name here.](#)

DOB: [Click to enter dob here.](#)

Court Date: [Click or tap to enter a date.](#) Type of Hearing: [Choose an item.](#) File #: [Click to enter text here.](#)

### **Educational** N/A

School/Daycare: [Click to enter text here.](#) Grade: [Choose an item.](#)

Status:  Doing Well  Some Struggles  Academic Issues  Behavioral Issues

Attendance Issues  Extracurricular Activities  IEP/504 Plan

Comments & Additional Info: [Click to enter text here.](#)

### **Medical/Dental**

Current on Wellness Checks: [Choose an item.](#) Current on Immunizations: [Choose an item.](#)

Upcoming Appointments: [Click or tap to enter a date.](#)

If not current, explain: [Click to enter text here.](#)

Medications: [Choose an item.](#) If yes, list here: [Click to enter text here.](#)

Comments & Additional Info: [Click to enter text here.](#)

### **Mental Health** N/A

Choose an item., Next Appt: [Click or tap to enter a date.](#)

Choose an item., Next Appt: [Click or tap to enter a date.](#)

Medications: [Choose an item.](#) If yes, list here: [Click to enter text here.](#)

Concerns or Additional Info: [Click to enter text here.](#)

### **Visitation** N/A Going Well Concerns (explain) Comments & Additional Info:

[Click to enter text here.](#)

Yes, I am participating in shared parenting. I do so in the following ways:  Email/Letter

Phone Calls  In person  Community visit/activity  Other: [Click to enter text here.](#)

No, I am not participating in shared parenting because [Click to enter text here.](#)

Yes, I am willing to work with CCDSS and the Court toward finalizing the permanent plan of  
[Click to enter text here.](#)

Additional information I would like to provide: [Click to enter text here.](#)

Yes, I have been made aware of the court date identified above.

I would like to address the court in person at the upcoming hearing.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Court date continued to: [Click or tap to enter a date.](#)  Notified by phone on: [Click or tap to enter a date.](#)