

*****Cause No.*****

FAMILY PLAN OF SERVICE
PHASE 3 OF 3

(Monitored return/ Phased return/Unsupervised with child(ren) while working to achieve stability for the child(ren).)

1. Abide by the 'General Rules and Requirements' attached to this Plan.
2. Maintain stable, legal employment to demonstrate ability to consistently meet the financial needs of the child(ren); Provide the caseworker with a copy of any and all paystubs (or written verification of payment) on a monthly basis.
3. Maintain stable housing that is free of safety hazards. The home shall be equipped with all working utilities and shall be consistently maintained for the rest of the case to demonstrate ability to provide the child with a safe, stable place to live.
4. Participate in parent mentor/trauma group every *Tuesday night from 5:30-6:30* with _____.
5. Participate in parenting training with _____ until successfully discharged. The worker will arrange for this training to begin; participate in said service until successfully discharged.
6. Ensure that the child(ren) are not left in the care of anyone until that person has been cleared and approved by your caseworker. If a babysitter is needed, inform your caseworker several days in advance so background checks can be run prior to said person providing care for the child(ren). This requirement includes any plan to leave the child(ren) in the care of a family member or friend.
7. Ensure that the child(ren) receive necessary follow-up medical and/or dental attention. Inform the worker of any appointments for the child(ren) within 7 days and provide written documentation of said appointments within 30 days of each appointment.
8. Ensure that your child(ren) attend(s) school in your local district every day unless there is an excuse (as set forth by said school district) for your child(ren)'s nonattendance on a particular day.
9. Participate in 3 N.A./A.A. (or other 12 step type program approved by the Court) meetings per week. (or random drug testing, or both)

Have a sign in sheet (provided by the caseworker) signed by an authorized person at each meeting attended. Present your sign in sheets to your caseworker each month.

Obtain a sponsor and maintain regular contact with that sponsor while you work the steps.

Your caseworker is: **Super Caseworker (123) 456-7894**

The permanency goal in this case is: reunification with (a) parent(s).

TO THE PARENT: THIS IS A VERY IMPORTANT DOCUMENT. ITS PURPOSE IS TO HELP YOU PROVIDE YOUR CHILD WITH A SAFE ENVIRONMENT WITHIN THE REASONABLE PERIOD SPECIFIED IN THE PLAN. YOUR COMPLIANCE WITH THIS SERVICE PLAN WILL BE EVALUATED AT THE HEARINGS LISTED ON THE SCHEDULING ORDER. IF YOU ARE UNWILLING OR UNABLE TO PROVIDE YOUR CHILD WITH A SAFE ENVIRONMENT, YOUR PARENTAL AND CUSTODIAL DUTIES AND RIGHTS MAY BE RESTRICTED OR TERMINATED OR YOUR CHILD MAY NOT BE RETURNED TO YOU. THERE WILL BE A COURT HEARING AT WHICH A JUDGE WILL REVIEW THIS SERVICE PLAN.

I ACKNOWLEDGE THAT I HAVE RECEIVED A COPY OF THIS SERVICE PLAN, THAT I HAVE REVIEWED IT AND THAT I UNDERSTAND WHAT IS REQUIRED OF ME.

DATE

PARENT'S SIGNATURE

CASEWORKER'S SIGNATURE