**Agency Case Consultation Template**

**Case name: Case #:**

**Supervisor: Worker:**

**Date: Date of last consult:**

**County: Judge:**

**Goal: Child specific recruiter:**

**Current placement:**

**Date of last DCBS face-to-face contact with child in placement:**

**Date of last case plan:**

**Date of last annual permanency review (APR):**

**Date presentation summary approved:**

**Date of last 3-month court review:**

**Youth transition plan: SCL waitlist:**

**APA signed: Adoption date:**

**Current case situation:**

**Barriers to permanency:**

**Recommendations: Due date:**

**1.**

**2.**

**3.**

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**Worker signature/date Supervisor signature/date**