

Instructions for Completing Form ICPC 100B

Interstate Compact on the Placement of Children Report on Child's Placement Status

Form ICPC 100B is used to:

- Confirm that an approved placement in accordance with the Compact has been made,
- Withdraw a request before the home study,
- Indicate that an approved resource will not be used,
- Report a change in the placement resource and/or type of care,
- Report a change of address, and
- Close an ICPC case.

It is an extremely useful tool for both the Compact offices and local agency staff in maintaining current knowledge of the child's movement into, out of, and if pertinent, within the receiving state. It is also a very important mechanism for notifying another state when a placement under the Compact has ended, and thus, providing formal confirmation of case closure.

If you open a case, you must close a case.

While it is the responsibility of the sending state to complete form ICPC 100B, the receiving state may complete form ICPC 100B if they become aware of a placement change or reason for termination.

Specific Instructions

Complete one form per child or per sibling if the action applies to siblings at the same time. In the first two blocks, enter the name and state of the ICPC Administrator to whom the form is being forwarded (TO) and the name and state of the ICPC Administrator whose state is submitting the reported information (FROM). If the sending or receiving state is a decentralized state (i.e., CA, OH or CO), also provide the county agency as applicable.

Section I – Identifying Information

Enter the full legal name and birthdate of the child for whom this placement information is being reported.

Enter the names of the legal parents as on form ICPC 100A. Enter the name of the resource, the address, and type of care. Select the same Type of Care that was chosen on form ICPC 100A (e.g., adoptive home, foster family home, group home care). Enter the relationship for relative placements.

Section II – Placement Status

To confirm the Initial Placement, check the appropriate box. Enter the exact date the child was placed in the receiving state. Select the same Type of Care that was chosen on form ICPC 100A (e.g., adoptive home, foster family home, group home care). Enter the relationship for relative placements.

If some aspect of the placement changes while the child remains in the receiving state, complete another ICPC 100B. Check the Placement Change box and indicate the exact effective date of the change. If the child moves from one placement resource to another, enter the updated placement information. For example, if a child leaves the parents' home and is placed in a residential treatment center, complete the facility's name and address and indicate the new Type of Care.

Subsequent ICPC 100B forms will list the new Placement Resource under Identifying Information. Any additional moves to place the child within the receiving state will be reflected in this same manner. If only the Name (e.g., mother remarries) or Address (original placement resource moves) changes, check and complete only those items that are applicable.

Complete form ICPC 100B when there is a change of purpose in an existing placement, e.g., from foster care to adoption. Form ICPC 100A may be required at the request of the receiving state.

Section III – Compact Placement Termination

Check the boxes that apply.

Adoption Finalized: If an ICPC adoptive placement has been finalized (consummated), check that box and the appropriate box for the state in which finalization occurred, Sending or Receiving. Attach the final adoption decree to form ICPC 100B.

Child Reached Majority/Legally Emancipated: Check this box if the child has reached majority age and has simultaneously ceased to be the responsibility of the sending agency or if the child has become emancipated through legal action such as marriage or court decision.

Legal Custody Returned to Parent(s): Check this box when the child's legal custody/guardianship is returned to the parent with the concurrence of the receiving state. Attach the court order transferring custody to the parent(s) to form ICPC 100B.

Legal Custody Given to Relative: Check this box when the child's legal custody or guardianship is awarded to relatives (other than parents) with the concurrence of the receiving state. Attach the court order transferring custody to the relative to form ICPC 100B.

Legal Custody Given to Other: Check this box when the child's legal custody or guardianship is other (other than parents or relatives) with the concurrence of the receiving state. Enter the name and relationship to the child. Attach the court order transferring custody to the other to form ICPC 100B.

Treatment Completed: Check this item when the placement resource has been providing a specific treatment-oriented service; that service has been completed; and the child is, therefore, being discharged from the facility (e.g., residential treatment center). This box may also be checked if the child/youth was placed through Article VI of the Compact.

Sending State's Jurisdiction Terminated with the Concurrence of the Receiving State: Check this box when the jurisdiction of the sending state has ended for some reason other than the transfer of custody to parents or relatives with the concurrence of the receiving state's supervising agency or court. For example, if formal legal custody or guardianship is not going to be addressed but both states agree that supervision is no longer required or if both states agree to transfer jurisdiction to the receiving state. If the sending state's jurisdiction is terminated without the concurrence of the receiving state (including custody or guardianship transfer), the decision was made unilaterally, and that box should be checked.

Unilateral Termination: Check this box when the interstate agreement has been terminated unilaterally, whether by the sending or receiving state. A unilateral termination is one in which one state ends the interstate placement agreement without the concurrence of the receiving state.

Child Returned to Sending State: Check this box when the child returns to the state the child was placed from. This may be due to a disruption in placement.

Child Moved to Another State: Check this box when the child moves to a state other than the sending state.

Proposed Placement Request Withdrawn: If you have submitted form ICPC 100A to request placement approval and have decided not to explore that resource further, check this box, list the Name of the Proposed Placement Resource, and date of your decision to terminate the Compact. Check this box only when no action has yet been taken on form ICPC 100A. If you are withdrawing more than one request, submit a separate form ICPC 100B on each and list each respective Placement Resource.

Approved Resource Will Not Be Used for Placement: Check this box when you have received an approved form ICPC 100A but have decided not to place the child with that resource. List the name of the Approved Placement and date of your decision to terminate the Compact.

Other Reason: Check and specify if the reason for Compact placement termination is not listed above. For example, the entire family moved to another state (new address should be entered under Placement Change), the death of a child, the child ran away and whereabouts are unknown.

Date of Termination: Enter the exact date of the activity, which ended the Compact Placement Agreement.

Section IV – Signatures

If a private person or local agency is completing the form, have a designated person sign, under Person/Agency/Supplying Information, identify the agency, and date the signature.

The second block should be signed and dated by the Compact Administrator, Deputy, or alternate.

Distribution

Complete four copies and distribute as follows (unless the form is submitted electronically or through NEICE):

- Sending agency keeps one copy and forwards the completed original plus three copies to:
- Sending State Compact Administrator (CA), Deputy Compact Administrator (DCA), or alternate keeps one copy and forwards two copies to:
- Receiving State Compact Administrator, Deputy Compact Administrator, or alternate keeps one copy and forwards one copy to the receiving agency.