ICPC 100B
REV. 8/2001

INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN
REPORT ON CHILD'S PLACEMENT STATUS

TO:	FROM:

Child's Name:	Birthdate:

Mother's Name:	Father's Name:

SECTION II - PLACEMENT STATUS

☐ Initial Placement of Child in Receiving State **Date Child Placed in Receiving State**:

Name of Resource:

Address:

Type of Care:

☐ Placement Change Effective Date of Change:

Name of Resource:

Address:

Type of Care:

SECTION III – COMPACT PLACEMENT TERMINATION

☐ Adoption Finalized ☐ In Sending State ☐ In Receiving State ☐ Court Order Attached

☐ Child Reached Majority/Legally Emancipated

☐ Legal Custody Returned to Parent(s) ☐ Court Order Attached

☐ Legal Custody Given to Relative ☐ Court Order Attached

Name:	Relationship:

☐ Treatment Completed

☐ Sending State's Jurisdiction Terminated with the Concurrence of the Receiving State

☐ Unilateral Termination

☐ Child Returned to Sending State

☐ Child Has Moved to Another State

☐ Proposed Placement Request Withdrawn

    Name of Placement Resource:

☐ Approved Resource Will Not Be Used for Placement

    Name of Placement:

☐ Other (Specify):

Date of Termination:

SECTION IV - SIGNATURES

Person/Agency Supplying Information:	Date:

Compact Administrator, Deputy or Alternate:	Date:

DISTRIBUTION (Complete four (4) copies of this form):
 • Sending Agency retains a (1) copy and forwards completed original plus three (3) copies to:
 • Sending Compact Administrator, DCA, or alternate retains one (1) copy and forwards two (2) copies to:
 • Receiving Agency Compact Administrator, DCA, or alternate retains one (1) copy and forwards one (1) copy to the receiving agency