



POST ADJUDICATION REVIEW BOARD FINDINGS AND RECOMMENDATIONS

The Honorable _____ Next Court Date _____ JD/JF # _____ -
 Review of _____ KK # _____
 Current DHS Worker _____ Phone # _____
 PARB Review Date _____ PARB reviewer (if applicable) _____
 PARB District/Board # _____ Date of Next PARB Review _____
 Name of CASA (if applicable) _____

| <u>Name of Child</u> | <u>Age</u> | <u>Present Placement</u> | <u># of Months out of home</u> | <u>ICWA?</u> | <u>Case Closed? Date/reason</u> |
|----------------------|------------|--------------------------|--------------------------------|--------------------------|---------------------------------|
| _____ | _____ | _____ | _____ | <input type="checkbox"/> | _____ |
| _____ | _____ | _____ | _____ | <input type="checkbox"/> | _____ |
| _____ | _____ | _____ | _____ | <input type="checkbox"/> | _____ |
| _____ | _____ | _____ | _____ | <input type="checkbox"/> | _____ |
| _____ | _____ | _____ | _____ | <input type="checkbox"/> | _____ |
| _____ | _____ | _____ | _____ | <input type="checkbox"/> | _____ |

BOARD'S FINDINGS AND RECOMMENDATIONS:

PARB Chairperson: _____

Judicial Acknowledgement: _____

Copies to: DA Mom's Atty. Dad's Atty. Child's Atty. DHS Tribe CASA
 Foster home/Placement Other: _____