

Confirmation of Investigation by Ministry of Social Services, Child and Family Programs

Section 1- to be completed prior to the interview(s). Please print clearly.

As an authorized investigating official, under the provisions of the Child and Family Services Act, 1989, I will be investigating the following student(s):

Interviewing agency: _____

Primary Interviewer: _____

Name	Date
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Secondary Interviewer: _____

Name	Date
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Signature of Primary Interviewer

Date

Section 2- to be completed once a decision has been made regarding the child. The original is to be returned to the Principal or designate as soon as possible and a copy provided to the primary interviewer.

Action Plan (Please Check Applicable items):

1. Investigation is on-going. Student(s) will return home. _____
Parents will be contacted by interviewing agency as soon as possible. _____
2. Student(s) has been apprehended. _____
Student(s) will be returning to current school. _____
Outcome unknown. Information to follow. _____
3. Follow up contact will be made with the Principal or designate. _____

Instructions to School Personnel:
