

DATE:

Dear

On _____ it was necessary to change the placement of
_____ because _____

Unfortunately, we were not able to let you know about this change before it occurred. If this change affects your visits, I will discuss a new visitation plan with you.

_____ This change will not affect your visits.
_____ This change will affect your visits; it is important that we discuss a new visitation plan before your next visit is scheduled.

I would like a chance to talk with you about this change. Please contact me by
_____.

If you do not agree with this change in placement, you have the right to have the matter reviewed by the Permanency Planning Action Team. If you would like to do this, contact me within 10 days of the date of this letter. You also have the right to have your lawyer ask the court to review the matter.

Sincerely,

_____, Social Worker
Phone # _____