

Per Section 1-6-102 of Title 10A of the Oklahoma Statutes (10A O.S. § 1-6-102), Oklahoma Human Services (OKDHS) is authorized to provide records to any federally recognized Indian tribe for any individual who has applied for foster care placement, adoptive placement, or guardianship placement through the tribe. Section 1-6-102 specifies that the tribe shall be required to maintain the confidentiality of the records.

Upon receipt of any findings letter, the tribal representative may contact their local Child Welfare Services office and, upon the showing of credentials, may review and/or copy records necessary in the assessment of applicants interested in fostering, adopting, or obtaining guardianship through a tribe.

Oklahoma Human Services (OKDHS) is requested to conduct a Child Abuse and Neglect Information System search for the tribal resource applicants named below. A signed authorization to release information is required for all persons living in the home 18 years of age and older.

Data attac			a facilitaria	the states and
Priority of	r Request	: - Comple	etea py	the Tribe

 Emergency - delaying immediate placement date: 						
 Urgent - urgent placement request of Date required: Routine - all other request types 	or needed for upcomin	ng court date				
Type of Placement - Completed by t	he Tribe					
Foster care	Adoption					
Therapeutic foster care	Guardianship					
□ Other:						
Requested By - Completed by the Tr	ibe					
Terra Rogers		(405) 964-4227				
Tribal representative		Phone number				
Verification by a tribal representative must accompany this request. This request will not be completed when required verifications are not included.						
Tribal Resource Applicant - Completed by the Applicant						
First name	Middle name	Last name				

Aliases, including maiden name, former married name, and all other names

Date of birth	Email address		Socia	Social Security number		
				AL		
Current street addre	SS	City		State	ZIP code	
Years at current add	dress Previ	ous county of reside	ence		_	
				AL		
Previous street addr	ress	City		State	ZIP code	
Dates resided						
				<u>AL</u>		
Previous street addr	'ess	City		State	ZIP code	
Dates resided						
				AL		
Previous street addr	ress	City		State	ZIP code	
Dates resided						
Name of Applicant	's Children (In or	Out of the House	nold)			
First name		Middle name	Last name			
First name		Middle name	Last name			
First name		Middle name	Last name			
i not name			Last hame			
First name		Middle name	Last name			

Unsworn Declaration Under Penalty of Perjury

I certify that placement is being pursued through the Kickapoo

tribe, and the search report is used for the purpose of assessing eligibility only. I further certify under penalty of perjury under the laws of the State of Oklahoma that the information entered above is true and correct to the best of my information and belief.

Applicant signature

Date

Email to: CANISTRIBES@okdhs.org

ATTN: Tribal IV-E Unit - Child Welfare Services, CANISTRIBES

Submit

Mail to: Oklahoma Human Services Tribal IV-E Unit - Child Welfare Services Child Abuse and Neglect Information System (CANISTRIBE) 2320 Arlington Street Suite B Ada, Oklahoma 74820