



### PLACEMENT AUTHORIZATION – KINSHIP OR OTHER NON-FOSTER CAREGIVER

### PLACEMENT

After completion of this form, mark page two to indicate that:

The placement is a kinship placement.

The placement is a placement with a caregiver who is not a relative of the child.

The placement is a placement with a caregiver who is a relative of the child and is not a kinship placement.

The placement is a placement with a caregiver who is a relative of the child and is a kinship placement.

<b>CHILD'S INFORMATION</b>	
THE TEXAS DEPARTMENT OF FAMILY AND PROTECTIVE SERVICES (DFPS) HAS	
Child's Name:	DOB: / /
Family ID No.:	Case No.:
Placement No.:	Cause No.:
Primary:	Race:
<input checked="" type="checkbox"/> Hispanic <input type="checkbox"/> Other	<input type="checkbox"/> White <input type="checkbox"/> Asian
<input type="checkbox"/> African American <input type="checkbox"/> Other	<input type="checkbox"/> Black <input type="checkbox"/> Other
American Indian/Alaskan Native	
Hispanic/Spanish	



