

FORM 32

[Rule 23(15)]

ORDER OF FOSTER CARE PLACEMENT WITH A FAMILY

OR

GROUP FOSTER CARE

The child (name and address)approximate age..... d/o or s/o
Mr..... and Mrs.....is in need of care and protection of a family.
Mr..... and Mrs.....resident of (complete address and contact numbers)
.....are declared fit for foster-care placement of the child after
considering the Individual Care Plan, Child Study Report and Home Study Report.

OR

Child Care Institution (Name and address).....is declared fit for foster-care
placement of the child after considering the Individual Care Plan and Child Study Report.

The child (name) is placed in foster care for a period of
..... under the supervision of the aforesaid Child Welfare Officer/Social Worker
(name and contact)

Chairperson/ Member

Child Welfare Committee