



Tennessee Department of Children's Services

# Court Jurisdiction Only (CJO) ICPC Home Study Request Checklist

## Interstate Compact on the Placement of Children (ICPC)

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

This checklist guides Tennessee (TN) judicial offices when submitting a request for a home study/placement under ICPC Regulations 2 or 7. The referral may be completed by the Judge's office, attorney, or DCS court liaison if DCS has an open case and is instructed by Judge/magistrate. ICPC requests must be submitted via email to the TN ICPC office at [tnicpc.ei-dcs@tn.gov](mailto:tnicpc.ei-dcs@tn.gov).

|                                                                                                                                                                                                                                    | Reg 2                    | Reg 2                    | Reg 7                           | Reg 7                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|---------------------------------|-------------------------------|
| <b>Note:</b> If the sending agency is seeking a home study on more than one out-of-state resource, please create a separate request packet specific to each request.                                                               | Relative/Kin Home Study  | Parent Home Study        | Expedited Home Study (Relative) | Expedited Home Study (Parent) |
| <b>Forms:</b> One for each child, created separately from the packet.                                                                                                                                                              |                          |                          |                                 |                               |
| <ul style="list-style-type: none"> <li><b>ICPC 100A Form CS-0525 Judge must sign and date.</b></li> </ul>                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        | <input type="checkbox"/>      |
| <b>Request Packet:</b> Assemble one packet for each home study request; scan and save as a single PDF; email as Document Type: "CJO INITIAL HOME STUDY REQUEST PACKET PART 01," add "PART 02" only if a single file exceeds 30 MB. |                          |                          |                                 |                               |
| <ul style="list-style-type: none"> <li>Cover Letter Requesting ICPC</li> </ul>                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        | <input type="checkbox"/>      |
| <ul style="list-style-type: none"> <li><b>Court Order(s). See next page for additional details.</b></li> </ul>                                                                                                                     |                          |                          |                                 |                               |
| <ul style="list-style-type: none"> <li>Dated within the last twelve (12) months and signed by judge; must clearly establish jurisdiction of county/State.</li> </ul>                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        | <input type="checkbox"/>      |
| <ul style="list-style-type: none"> <li>Expedited Order of Compliance, dated within three (3) business days of submission (signed by Judge)</li> </ul>                                                                              |                          |                          | <input type="checkbox"/>        | <input type="checkbox"/>      |
| <ul style="list-style-type: none"> <li>Proof of living circumstances (if temporary custody with someone other than parent)</li> </ul>                                                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        | <input type="checkbox"/>      |
| <ul style="list-style-type: none"> <li>Detailed Child Summary (1 per child). Include assessments if applicable.</li> </ul>                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        | <input type="checkbox"/>      |
| <ul style="list-style-type: none"> <li>Financial-Medical Plan (1 per child). Form <b>CS-0795</b></li> </ul>                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        | <input type="checkbox"/>      |
| <ul style="list-style-type: none"> <li>Regulation 7 Combined Form: ICPC 101 and Signed Statement of Sending Agency Case Manager (1 per packet). Form <b>CS-0563</b></li> </ul>                                                     |                          |                          | <input type="checkbox"/>        | <input type="checkbox"/>      |
| <ul style="list-style-type: none"> <li>Sending Agency's Case Manager Signed Statement ICPC Regulation No. 2 Form <b>CS-0958</b></li> </ul>                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> |                                 |                               |
| <ul style="list-style-type: none"> <li>Child(ren)'s birth certificate(s)</li> </ul>                                                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        | <input type="checkbox"/>      |
| <ul style="list-style-type: none"> <li>Child(ren)'s Social Security card(s)</li> </ul>                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        | <input type="checkbox"/>      |
| <b>Additional documents:</b> Provide with initial request packet if available, some states may require them to assign the case.                                                                                                    |                          |                          |                                 |                               |
| <ul style="list-style-type: none"> <li>Proof of paternity – many states require court order or DNA testing for placement with father or unlicensed paternal relative. Contact TN ICPC with questions.</li> </ul>                   | May be required          | May be required          | May be required                 | May be required               |

Check the "Forms" Webpage for the current version and disregard previous versions. This form may not be altered without prior approval.

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