

Tennessee Department of Children's Services

Indian Child Welfare Act (ICWA) Referral to Cultural Affairs Team

	Child's/Youth's Name and Person ID:
2.	Child's/Youth's Date of Birth:
3.	Is this case custodial or non-custodial?
4.	Child/Youth's Region/County:
5.	Name and contact information of the birth parents:
6.	Did the removal occur on tribal land?
7.	Provide the name of any declared Tribal affiliation along with any communication which has occurred with them.
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0.	Please provide a case summary, including the status of the dependency and neglect juvenile court proceedings.
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	court proceedings.
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9.	Court proceedings. When is the next CFTM?
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9.	When is the next CFTM? O. Please provide name and contact information for the assigned worker, and direct supervisor:
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