|  |  |
| --- | --- |
| **State_Seal3**  STATE OF WASHINGTON  DEPARTMENT OF CHILDREN, YOUTH, AND FAMILIES  LICENSING DIVISION  Specific Office  Date | |
| WASHINGTON STATE INTERSTATE COMPACT  PO BOX 45711  OLYMPIA WA 98504-5711 | Child’s Name:    Placement Resource:    Sending State: |
| To Whom It May Concern:  This letter is to inform you that the home study request is being closed for the following reason:  Potential placement resource has disqualifying crimes and/or CPS history (list disqualifying crimes and/or summarize the CPS history):  Potential placement resource has withdrawn from the home study process (provide reasons if known):  Potential placement resource did not respond after the following attempts to complete the home study process (list the dates, type(telephonic, letter, or email etc.), and theresult of these attempts, at least one of which should be telephonic:  Other (explain, list reasons, or remedies if possible):  If you have any questions, please contact me at      .  Sincerely,  Social Service Specialist's Name  Region / Office | |