Date: 3/3/2020

Nevada KinGAP Approval Checklist

(Administrative APPROVAL must be granted prior to pursuing Nevada KinGAP)

Child	l Infor	mation	Submission/Today's Date:							
Child Name:			DOB:	Child ID#						
Custody Date:			IV-E Eligible:	Yes:	No:					
Case	Name	: :		Case#:						
Case	worke	r:	Phone:							
Prop	Proposed Guardian Information									
#1 Proposed Guardian Name: DOB:										
Relationship:										
#2 P	ropose	ed Guardian Name:			DOB:					
Rela	tionshi	ip:								
		Child is a sibling of a child unde	er an existing Nevada K	inGAP with this same	Proposed Guadian.					
		Name of child: (If this section is completed, stop form here)								
		(1)	this section is completed, st	ор јогиг негеј						
Yes	No	1) Child entered child welfare custody pursuant to a voluntary agreement by the parent or guardian.								
		Summary of circumstances surrounding Voluntary Agreement and Outcome:								
		2) Child entered child welfare custody pursuant to a judicial order that continuation in the home was								
		"contrary to the welfare of the child".								
		Date of Court Order: 3) Reasonable efforts have been made to reunify the child.								
		Summary of Reasonable Efforts:								
		,								
		4) The court found that reasonable efforts to reunify the child are not required.								
		Date of Court Order: 5) Child is an Indian Child. If you get ive offerts were made on behalf of the Indian child.								
		5) Child is an Indian Child. If yes, active efforts were made on behalf of the Indian child. Summary of Active Efforts Made:								
		Summary of Active Entries Made.								
		If No, Item is not applicable.								
		6) Being returned home or adopted are not appropriate permanency options for the child.								
		Explain:								
		7) The proposed guardian, while	licensed as a foster home,	, had placement of the o	child for a minimum of six					
		consecutive months.								
		Date of Proposed Guardian Licens		Date of Child Plac						
		8) The proposed guardian has de	monstrated a strong comi	mitment to care for the	child permanently.					
		Evidenced by:								
		9) The child demonstrates a stror	ng attachment to the prop	osed guardian.						
		Evidenced by:								

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	10) The child is age 14 of older and has consented to the					anent guardianship arrangement.
	D	Date: To Whom:				
Program Manager Signature						Date
Ü		0 0				
Administrative Signature						Date
						- 200
Yes	No	Child is Elia	rible for IV-F Nevada KinGAP	Yes	No	Child is Fligible for General Nevada KinGAP