





**PLAN TO REDUCE OVERCAPACITY**

Explain *(if you need additional room, please attached sheet)*:

LENGTH OF TIME OVERCAPACITY/WAIVER IS GRANTED FOR      WEEKS OR

Permanent Overcapacity:  Yes                       No

**EXISTING WAIVERS**

Explain *(if you need additional room, please attached sheet)*:

Explain Significant Issues in the Foster Family's History such as Substantiations of Abuse or Neglect or any Previous Concerns with this Family.

Explain *(if you need additional room, please attached sheet)*:

**PHYSICAL REQUIREMENTS OF THE HOME (POOLS, LEAD PAINT FOR CHILDREN >6 )**

Explain *(if you need additional room, please attached sheet)*:

**TELEPHONE**

Explain *(if you need additional room, please attached sheet)*:

**CHILDREN'S BEDROOM, CLOTHING, PRIVACY, EGRESS**

Explain *(if you need additional room, please attached sheet)*:

**CRIMINAL HISTORY, PENDING CRIMINAL ACTIONS, HISTORY OF CHILD ABUSE OR NEGLECT**

Explain *(if you need additional room, please attached sheet)*:

**MORE THAN ONE OUT-OF-HOME CARE LICENSE (DDS AND CPA)**

Explain *(if you need additional room, please attached sheet)*:

**RELATIVE PLACEMENTS IN CPA HOMES**

Explain *(if you need additional room, please attached sheet)*:

**IN-HOME DAYCARE**

Explain *(if you need additional room, please attached sheet)*:

**FINANCIAL CONDITION**

Explain *(if you need additional room, please attached sheet)*:

**FOOD AND WATER**

Explain *(if you need additional room, please attached sheet)*:

**ANIMALS**

Explain *(if you need additional room, please attached sheet)*:

## HEALTH STANDARDS

Explain (if you need additional room, please attached sheet):

## Required Signatures (as applicable):

Position	Name	Signature	Date
FASU PM			
CPS PM			
Regional Administrator (or Designee)			
Director of OChYP			
Commissioner			

**NOTE:** Any request involving more than one Region requires a discussion between both Regional teams before placement occurs.

For waivers sent to the Commissioner's attention or Office of Youth and Children in Placement, please fax to: **860-560-7066**