

INDIVIDUALIZED CHILD-SPECIFIC RECRUITMENT PLAN

Child's Name: _____

Date: of TPR _____

Document the Dates that each required activity was completed. The listed activities are the minimum requirements to be completed each month.

Activities for Month One

1. Review of child's case file for the purposes of determining possible connections, chronology and needed resolutions. Date Completed: _____

- Volume One
- Volume Two
- Volume Three
- Volume Four

2. Prepare child chronology from review of the case file. Date Completed: _____

COMMENTS:

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Activities for Month Two

1. Initial visit with child, inform child of your job duties Date Completed: _____

2. Contacts with possible prior adult connections from review of case file:

Letter sent/interview with former caregiver: _____ Date Completed: _____
- Desired involvement: _____

Letter sent/interview with former caregiver: _____ Date Completed: _____
- Desired involvement: _____

Letter sent/interview with relative: _____ Date Completed: _____
- Desired involvement: _____

Letter sent/interview with adult connection: _____ Date Completed: _____
- Desired involvement: _____

Letter sent/interview with adult connection: _____ Date Completed: _____
- Desired involvement: _____

Letter sent/interview with former counselor _____ Date Completed: _____
- Desired involvement: _____

3. Respond to all inquiries from websites within 3-5 days

1) Name: _____ Relationship: _____ Date: _____

Comment _____

2) Name: _____ Relationship: _____ Date: _____

Comment _____

3) Name: _____ Relationship: _____ Date: _____

Comment _____

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Activities for Month Three

1. Conduct second visit with child/complete questionnaire Date Completed: _____

2. Create or Update the following:

➤ Study of the child Date Completed: _____

➤ Adoption Exchange narrative, including photo Date Completed: _____

➤ AdoptUSKids Date Completed: _____

➤ CAP (Children Awaiting Parents) Date Completed: _____

3. Additional contacts with former significant adults Date Completed: _____

Letter sent/interview to significant adult: _____ Date Completed: _____

- Desired involvement: _____

Response to a letter sent: _____ Date Received: _____

- Desired involvement: _____

Response to a letter sent: _____ Date Received: _____

- Desired involvement: _____

4. Respond to all inquiries for websites within 3-5 days

1) Name: _____ Relationship: _____ Date: _____

Comment _____

2) Name: _____ Relationship: _____ Date: _____

Comment _____

3) Name: _____ Relationship: _____ Date: _____

Comment _____

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Activities for Month Four

1. Third visit, begin child preparation work with child Begin Date: _____
What family information does the child know? Does not know?
What does the child know about why he/she cannot go home?
What does a permanent connection to an adult mean?

2. Prepare referral packets and

send to neighboring MAPP trainers Date Completed: _____
send to neighboring Wendy's Wonderful Recruiters Date Completed: _____

3. Ask child for recommendations/ideas of adults to contact: Date Completed: _____

1) Name: _____ Relationship to child: _____

Contact information: _____

2) Name: _____ Relationship to child: _____

Contact information: _____

4. Additional letters/interviews of adults as recommended by child.

Name: _____ Date Completed: _____

- Desired involvement: _____

Name: _____ Date Completed: _____

- Desired involvement: _____

5. Respond to all inquiries within 3-5 days

1) Name: _____ Relationship: _____ Date: _____

Comment _____

2) Name: _____ Relationship: _____ Date: _____

Comment _____

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Activities for Month Five

1. Fourth visit to continue preparation of child and ask about making a video, show example.

2. Feature child in newspaper, if appropriate

Where featured: _____ Date: _____

Where featured: _____ Date: _____

3. If child is ready, make video to be shown in MAPP classes locally and neighboring areas.

Video is shown at: _____ Date Shown _____

Video is shown at: _____ Date Shown _____

Video is shown at: _____ Date Shown _____

4. Target special interest groups based on child information:

Group: _____ Date Completed: _____

Group: _____ Date Completed: _____

5. Respond to all inquiries 3-5 days

1) Name: _____ Relationship: _____ Date: _____

Comment _____

2) Name: _____ Relationship: _____ Date: _____

Comment _____

3) Name: _____ Relationship: _____ Date: _____

Comment _____

4) Name: _____ Relationship: _____ Date: _____

Comment _____

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Activities for Month Six

1. Fifth visit with child, continue preparation and encouragement Date Completed: _____

2. Update exchanges and CAP Book, if needed Date Completed: _____

3. Arrange for Wednesday's Child filming
Station: _____ Date Completed: _____
Station: _____ Date Completed: _____

4. Check bulletin board sites Date Completed: _____

5. Send referral packets to more MAPP and Wendy's Recruiters Date Completed: _____

6. Establish a permanency team and schedule meeting

7. Respond to all inquiries within 3-5 days

1) Name: _____ Relationship: _____ Date: _____

Comment _____

2) Name: _____ Relationship: _____ Date: _____

Comment _____

3) Name: _____ Relationship: _____ Date: _____

Comment _____

4) Name: _____ Relationship: _____ Date: _____

Comment _____