

POSTADJUDICATION REVIEW BOARD

Tribal Questionnaire

Nam	e of child:
form	the tribal representative of the child, your input will greatly enhance the review process. This is completely voluntary. You may fill out or omit any questions that you wish. If you would o include more information, space is provided.
1.	Are you aware of the family child welfare history and why the child was removed from the home?
2.	How long has the child been in foster care/out of home placement?
3.	Is the foster home/placement ICWA Compliant?
4.	Do you feel the current cultural/medical/emotional/psychological needs of the child are being met? (if no, why not?)
5.	Are you aware of the goals for placement as set out in the service plan and do you agree?
6.	How often is visitation with the parents? With other family members?
7.	How is the child's behavior after visitation?

8.	How is the child doing in school?
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9.	Is this the school that the child attended prior to placement?
10.	What suggestions do you have regarding the Court's and the OKDHS' compliance with the ICWA?
11.	Additional questions from PARB:
12.	Please include any additional comments you have about the child:
Form	completed by: Date: