

Example of SB1460 Approved Tribe/Tribal Agency Home Approval to County

TRIBAL AGENCY LETTERHEAD

Dear _____ County Social Worker

RE: SB 1460 Tribally Approved Home and Clearance

THIS IS TO CERTIFY THE FOLLOWING:

1. The home located at _____, _____ has been approved as a **Tribally Approved Home** pursuant to the Indian Child Welfare Act for use as a prospective foster or adoptive home for _____, a child that is or may be covered by the Indian Child Welfare Act.

2. Pursuant to Welfare and Institutions Code section 10553.12, the following individual or individuals associated with the home have been cleared or granted exemptions, consistent with standards set forth in California Health and Safety Code section 1522 and 1522.1.

Name: _____
Date of Approval _____
Date of Birth _____
Residence _____
Relation to the Home _____
(e.g. Resident, employee, in relationship with resident)
Date Cleared (no criminal/CACI history) _____
Date Exemption Granted _____

Name: _____
Date of Approval _____
Date of Birth _____
Residence _____
Relation to the Home _____
(e.g. Resident, employee, in relationship with resident)
Date Cleared (no criminal/CACI history) _____
Date Exemption Granted _____

Name: _____
Date of Approval _____

Date of Birth _____
Residence _____
Relation to the Home _____
(e.g. Resident, employee, in relationship with resident)
Date Cleared (no criminal/CACI history) _____
Date Exemption Granted _____

3. In the event that we receive a report from the California Department of Justice that there has been a report of a **subsequent arrest or conviction** of any of the above listed individuals, **we certify that we will notify you within twenty-four (24) hours of the notification.**

4. In the event that this Tribal Agency revokes the clearance or exemption, we will notify you of the revocation (e.g. as agreed to by the Tribal Agency and the County) or (as soon as practicable).

Please verify the assigned county social worker for this child, if different from the above noted Social Worker.

The Tribal Agency contact for this Tribally Approved Home is _____
who can be reached at (___) _____.

When you do a home visit, please make arrangements with the Tribe if the home is located on tribal land, or if not located on tribal land, call the Tribally Approved Home directly.

So Certified on -----, at -----

Signed,

(e.g Director Tribal Agency)