



Local Indian Child Welfare Advisory Committee (LICWAC) Checklist

Case Worker Name _____

Date _____

Please combine all items listed below in order as ONE PDF packet and submit as one file.

Please make sure your LICWAC packet contains all of the following items. If you cannot provide the listed items, please leave an explanation at the bottom of this form as to why they were not provided.

1. Referral Form 09-120
2. New Recommendation Form (05-211)
3. Previous Recommendation Form (05-211)
4. Indian Identity Request Form (09-761)
5. Ancestry Chart (04-220)
6. Relative Search
7. Tribal Correspondence
8. Court Report
9. GAL Report
10. Review Order
11. Provider Reports

Please explain why the above items were not all provided.