Safe and Timely Progress Form (Submit a copy to ICPC office at 30 days, 60 days, and with a completed home study)		
Children's Name(s) & Case Number(s) (additional sheets may be attached for sibling groups)		
		groups,
Placement Resource Na	me (s) & Provider Number	
List dates of contacts & type of contact: (Recommendation: Attach a copy of the contact log from FACTS)		
Date CIB/NCIC was initia	ated/processed for placem	ent resource:
If the study was requested more than 60 days ago, please indicate the main reason for the delay of the completion of the home study: (only choose 1 reason)		
 Pending FBI/NCIC and CIB checks Non-compliance by the placement resource (additional information may be attached, if desired) Conflicting job duties, workloads or staff resources 		
If the placement resource is required to attend pre-service training, but all other requirements have been met, approval of the home assessment may be granted prior to the training being completed. The home assessment can be completed, with notations that the placement resource has to complete training and the time line for completing the training. The home assessment can be submitted to the ICPC Office to meet the timeliness requirement. (The policy indicates that the placement resource can have up to 6 months from the initiation of the home study to complete the training requirements.)		
By signing below, I certify that this home study was conducted or attempted in accordance with all applicable requirements of the State of West Virginia, and P.L. 109-239, Safe and Timely Interstate Placement of Foster Children Act of 2006. The child or children's best interests, including safety, permanency, health, well-being, and mental emotional, and physical development were considered. Based on the information available at this time, it is my recommendation that this placement be:		
Pending ApprovedNot Approved		
Print Name:		
Signature:		
Date:		