

FIRST NATIONS CHILD AND FAMILY SERVICES NOTICE OF DISCHARGE

PAW Number/Fiscal Year:

493738.BC (2019-2020)

Purpose:

This information is required to determine financial responsibility for the child placement.

Reporting Period:

Monthly

Field Definitions:

Field	Definition
1. Child Information	
Given Name(s) Family Name (Legal/Aliases) Gender Date of Birth (YYYYMMDD) IRS Number Band Name Band Number	The child's given name(s), family name (legal/aliases), gender, date of birth, Indian Registration number, band name and band number. Dates are in the format of 'Year Month Day'. A valid Indian Registration System Number is comprised of 10 digits and in the format #####. The band number has a maximum of 5 digits and in the format #####.
2. Admission	
Admission	The date on which the child was admitted into care, in the format of Year-Month-Day.
3. Discharge or Transfer	
Discharge	Complete the Discharge box if the child is being discharged from care and not being transferred. <ul style="list-style-type: none"> • Date of discharge (in the format of 'Year Month Day')
Transfer	Complete the Transfer box if the child is being transferred to the Province of BC or to another First Nations Child and Family Services Agency. <ul style="list-style-type: none"> • Province of BC or name of First Nations Child and Family Services Agency • Date of transfer (in the format of 'Year Month Day')
4. Contact	
FNCFS Contact	
Given Name Family Name Telephone Number	The given name, family name and telephone number of the First Nations Child and Family Services contact (a valid telephone number includes the 3 digit area code in the format ###-###-####)

Field	Definition
Child Welfare Director	
Given Name Family Name	The given name and family name of the Child Welfare Director
FNCFS Agency	
Name Number Date (YYYYMMDD)	The First Nations Child and Family Services agency name, for any questions about the information and the date that the information was acknowledged, in the format of 'Year Month Day'.