



**APPLICATION FOR A REVIEW OF A RESIDENTIAL PLACEMENT
Section 36 (1) of the Child and Family Services Act**

File Number:

Date of Application:

1. Applicant's Information

Last Name:

First Name:

Date of Birth:

Residential Placement Facility:

Phone Number:

Ext.:

Youth provided consent to:

- Provide notice of the application to the office of the Provincial Advocate for Children and Youth.
- Talk with the office of the Provincial Advocate for Children and Youth regarding this application.
- Provide the office of the Provincial Advocate for Children and Youth with a copy of the Board's Reasons for Decision.

Youth's Advocate:

Phone No.:

Ext.:

Fax No.:

2. Youth's Band or Native Community (if applicable)

Name of Band or Native Community:

Address:

Phone No.:

Ext.:

Fax No.:

3. Respondent's Information (Custodial Guardian)

Children's Aid Society:

Address:

Phone No.:

Ext.:

Fax No.:

OR

Parent's Full Name:

Address:

Phone No.:

Fax No.:

4. Reasons for Application