**Section 2.** Include the total number of people listed in this section to the box on page 1.

**Name of person who can help:**       Date interviewed:
Relationship to the child:       [ ]  Maternal [ ]  Paternal [ ]  Kin **Please check all that apply that the relative/kin indicated they could do to assist the child/family**

[ ]  telephone the child [ ]  take the child to visits with parents/siblings/family/kin
[ ]  write letters to the child [ ]  take the parent to visits
[ ]  take the child to/from school [ ]  supervise visits between parents/siblings
[ ]  take the child on outings [ ]  help with childcare
[ ]  take the child on family gatherings [ ]  take the child/parent to services
[ ]  want to participate in case planning [ ]  interested in caring for the child long term
 [ ]  interested in providing respite care
[ ]  Other please describe:

 **Name of person who can help:**       Date interviewed:
Relationship to the child:       [ ]  Maternal [ ]  Paternal [ ]  Kin **Please check all that apply that the relative/kin indicated they could do to assist the child/family**

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 *Duplicate as many pages as necessary*