

Date:

Ms. Lorna Hanson
Director of Child and Family Services
777 Portage Ave
Winnipeg, MB
R3G ON3

Re: The discharge of child(rens) name(s) and each DOB

Dear Lorna,

I am writing you requesting an Independent Appeal (Adjudication) based on the recent refusal by the _____ Authority re: my appeal of the discharge of child's name from my care.

If you require any supporting documentation from me please feel free to ask.

I look forward to your response.

Sincerely,

Foster Parent(s) Name

Licensed Foster Parent with agency name

Telephone number and/or email address here