

Appendix 3B

Checklist: Diligent Search to Locate a Father

Purpose: This form suggests efforts a county department may take when exercising due diligence in locating the father of a child who is the subject of an abuse, neglect, or dependency proceeding. This form is not intended to be an exhaustive list or a mandatory checklist where each suggestion must be acted upon. The diligence of a search is determined on a case-by-case basis.

Suggestions for Use: Document the date and type of action taken (e.g., letter sent to XYZ address, voicemail left for X at ###-####), the name of the agency or company contacted, and the name of the person interviewed. Record the information provided regarding the father's current or formerly known contact information and/or location.

Child's Name: _____

Father's Name: _____

Contact Child's Father: _____

___ / ___ / _____ Mailed Letter to: _____

___ / ___ / _____ Called Phone Number: _____

No answer Left message Spoke to: _____

___ / ___ / _____ Sent Email to: _____

Result: _____

Family Interviews

___ / ___ / _____ Mother, Father's Contact Information Provided: _____

___ / ___ / _____ Child, Father's Contact Information Provided: _____

___ / ___ / _____ Household Member or Relative (Name): _____

Information Provided: _____

___ / ___ / _____ Household Member or Relative (Name): _____

Information Provided: _____

Other Interviews

___ / ___ / _____ Employer (Current or Former)

Name of Person Contacted: _____

Information Provided: _____

___ / ___ / _____ Co-Worker (Current or Former) Name: _____

Information Provided: _____

___ / ___ / ___ Child Support Services Agency (Agency Name): _____
Name of Person Contacted: _____
Information Provided: _____

___ / ___ / ___ Landlord (Current or Former) (Name): _____
Information Provided: _____

___ / ___ / ___ Provisional Counsel Appointed to Father (Name): _____
Information Provided: _____

___ / ___ / ___ Department of Public Safety, Division of Adult Corrections (Jail, Incarceration, Probation)
Name of Person and Agency/Facility Contacted: _____
Information Provided: _____

___ / ___ / ___ Utility Company (Electric, Gas, Water) (Company Name): _____
Name of Person Contacted: _____
Information Provided: _____

___ / ___ / ___ Other (Name): _____
Information Provided: _____

Records Search

___ / ___ / ___ DMV Search (Driver's License, Vehicle Registration), State: _____
Information Listed: _____

___ / ___ / ___ Property Tax Search (Real Property, Vehicle), State, County: _____
Information Listed: _____

___ / ___ / ___ Board of Election (Voter Registration), State, County: _____
Information Listed: _____

___ / ___ / ___ N.C. Wildlife Commission or Other State's Equalivent (Hunting/Fishing License): _____
Information Listed: _____

___ / ___ / ___ Professional Licensing Board (Name, State): _____
Information Listed: _____

___ / ___ / ___ Telephone Directory (Directory Assistance, Phone Book, Internet White Pages)
Information Listed: _____

___ / ___ / ___ U.S. Post Office
Information Listed: _____

___ / ___ / ___ Internet Search (Include Social Media): _____
Identify Searches Made: _____
Contact Information Discovered: _____

___ / ___ / ___ Internal Agency Database
Program Contacted: Child Welfare, Child Support, Other _____
Information Listed: _____

___ / ___ / ___ Offender Public Information Search
Information Listed: _____

___ / ___ / ___ N.C. Sex Offender and Public Protections Registry Search
Information Listed: _____

___ / ___ / ___ N.C. Statewide Automated Victim Assistance and Notification (NC SAVAN)
Information Listed: _____

___ / ___ / ___ VCAP (Civil): Case Name: _____
Court and Docket No.: _____ *Date of Record:* ___ / ___ / ___
Information Listed: _____

___ / ___ / ___ ACIS (Criminal): Case Name: _____
Court and Docket No.: _____ *Date of Record:* ___ / ___ / ___
Information Listed: _____