

Best Practices: School District Placement Decision

Student Name: _____

Date of Birth (mm/dd/yyyy): _____

Guardian or Education Decision Maker: _____

Address: _____

Phone: _____ Email: _____

Placement Determination: _____

School district recommended placement: _____

Child welfare agency recommended placement: _____

The school district and child welfare agency feel that it is in the student's best interests to attend the school listed above. This decision was made because we believe it is what is best for the child. **Here are the reasons for that decision:**

Under RCW 28A.320.148, Foster Care Liaisons are responsible for leading and documenting the development of a process for making best interest determinations.



Washington Office of Superintendent of
PUBLIC INSTRUCTION

School District and Child Welfare Agency Attendees and Contacts:

School District Contact: _____

Phone: _____ Email: _____

Child Welfare Agency contact: _____

Phone: _____ Email: _____

Additional Best Interest Determination Meeting Attendees:

NAME	ROLE