

## Visitation Monitoring Form

It is requested that you complete the following form as soon as possible after the return of your foster child from a home visit, or as soon as possible following a visit that you may have supervised. This information will provide essential information and feedback to the case worker, and juvenile court if applicable, about the quality of the visit. This will help in the detection of possible problem areas as well. Thank you for your continued support.

**Name of Child:** \_\_\_\_\_ **Date of Visit:** \_\_\_\_\_

**Visitor(s):** \_\_\_\_\_ **Time of Visit:** \_\_\_\_\_

1. Was the child picked up and returned according to the pre-arranged schedule? Be specific about the number of minutes late or early as well.
  
  
  
  
  
  
  
  
  
  
2. If the visit did not occur, were you contacted by either the worker or the parent well in advance? Please give the reason for the cancellation:
  
  
  
  
  
  
  
  
  
  
3. Describe, as detailed as possible, the events, behaviors, and comments of the visit. Please try to distinguish between those behaviors which occurred before the visit, during, or after.

Respectfully submitted by: \_\_\_\_\_ Date: \_\_\_\_\_