



## Children and Family Services

### Grievance Hearing – Recommended Decision

In the matter of Grievance Review Hearing #:	Client ID #:
For Complainant:	Authorized Representative:
Address:	Name:
License #:	Address:

**Hearing date:** Click or tap to enter a date.

#### **Parties Present:**

Complainant:	
Authorized Representative:	
County Representative:	

#### **Documentary Evidence/Testimony:**

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#### **Conclusion:**

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**Witnesses:**

Complainant:	
County Representative:	
Other:	

**RECOMMENDATION:** It is proposed that the Director of Children and Family Services adopt this recommended decision within ten business days of the date this decision was rendered. The removal of the child from the home was:  Approved  Denied, as there  Was  Was not sufficient evidence to support the removal.

\_\_\_\_\_  
Grievance Hearing Agent (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Director/Designee Recommended Decision:**

- Granted
- Denied

**Reason:** (if recommendation is denial)

\_\_\_\_\_  
Director of Children and Family Services

\_\_\_\_\_  
Date

**IMPORTANT MESSAGE**

**You may ask for a review of this decision by filing a petition in Superior Court under Code of Civil Procedure §1094.5 and 1094.6, no later than the 90th day following the date on which the hearing decision became final. You may contact Legal Services for assistance.**

**This decision is protected by the confidentiality provisions of Welfare and Institutions Code §10850.**

**Distribution:**

- Complainant
- Complainant's Authorized Rep/Attorney
- PID-CRU-0620
- PRD
- Admin File
- Central DD
- Eastern DD
- Western DD
- North Desert DD
- Child File