

Elizabeth Aldred
Director

Lisa A. Roberts
Deputy Director

## Department of Health and Human Services

[Non-Custodial Parent's Name] [Address] [City, State, ZIP]

Dear [Non-Custodial Parent's Name],

I trust this message finds you well. My name is [Your Name], and I am a youth justice social worker at Waukesha County. I am writing to extend an invitation for collaboration and open communication regarding [child's name], who is currently receiving support from our team.

I firmly believe that involving both custodial and non-custodial parents is crucial in providing holistic care and support to young individuals navigating the justice system. Your perspective and involvement in [child's name]'s life are incredibly valuable.

I would like to offer an opportunity for us to connect and discuss how we can work together to ensure the best possible outcomes for [child's name]. Your insights into [his/her/their] strengths, challenges, and goals can significantly influence the support we provide.

I am committed to creating a supportive environment where your input is valued and integrated into [child's name]'s journey. Whether it involves regular updates, exploring ways to enhance [his/her] support network, or discussing any concerns you may have, I am here to facilitate and support your involvement.

Please don't hesitate to contact me at [Your Phone Number] or via email at [Your Email Address]. Your engagement in [child's name]'s life can make a profound difference, and I am eager to explore how we can collaborate effectively.

Thank you for considering this invitation. I look forward to the possibility of working together to ensure [child's name]'s well-being and positive development.

Warm regards,

[Your Name] Youth Justice Social Worker Adolescent and Family Unit Name Date Page 2

> Health & Human Services Dept. Desk Phone: [Your Desk Phone] Cell Phone: [Your Cell Phone]

www.waukeshacounty.gov/hhs

[Initials]