



# Wood County Human Services

[NCP Name]  
[NCP Address]  
[NCP Phone number]

[Today's Date]

Dear [NCP Name],

You have been identified as a potential parent of [Child(ren)'s first and last name(s)][Child's DOB]. Wood County Human Services is working with your child. Our agency would like to speak with you regarding your child(ren) and your relationship/involvement with the child(ren). We would like to find out the best way to speak with you. Please fill out the information below and checkmark how you would like us to speak with you.

Telephone number(s) \_\_\_\_\_

Email Address (es) \_\_\_\_\_

Mailing Address \_\_\_\_\_

If you do not wish to have contact with our agency about your child please explain below (feel free to use extra pages as needed):

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If you have questions, comments or concerns please contact me at the information below.

Sincerely,

[Worker name]  
[Worker Address]  
[Worker Phone number]  
[Worker Email]