|  |  |
| --- | --- |
| A N Other  Street name  Town or city  County  POSTCODE | **Your ref:** \*  **Our ref:** AA/123  **Enquiries to:** contact name here  **Email:** name@northumberland.gov.uk  **Tel direct:** (00000) 000000  **Date:** 00 Month YYYY |

Dear

**THE CHILDREN ACT 1989 SECTION 68**

|  |  |
| --- | --- |
| **Name of Child** |  |
| **Address** |  |
|  |  |
| **Date of birth** |  |

In connection with the arrangement to privately foster the above named child, I am writing to inform you that you are disqualified from being a private foster parent and the Council is not prepared to withdraw this disqualification.

|  |
| --- |
| **The reason for your disqualification is:** |
|  |

In accordance with Paragraph 8 of Schedule 8 of the Act you may appeal to a Court within 14 days from the date on which you receive this letter.

Yours sincerely

Team Manager

cc: (name of parent)