



ARKANSAS STATE POLICE
CRIMES AGAINST CHILDREN DIVISION

Child Maltreatment True Investigative Determination Notice
to Alleged Juvenile Offender (if currently age 18 or older)

To:
Address:

From:

Title:

Phone:

County Office:

Date: CHRIS Referral #

Re: Name of Alleged Offender:

Name of Alleged Victim:

The Arkansas State Police Crimes Against Children Division received an allegation of suspected child maltreatment involving you at some point during the time you were 14 through 17 years of age. The incident was reported on (date) .

The type of maltreatment was .

Pursuant to A.C.A. § 12-18-703, this letter is to inform you that based on the preponderance of the evidence, the investigative agency determined the allegation for sexual abuse to be true. Juveniles, 14 to 17 years old at the time of the act or omission that resulted in the true finding will automatically have an administrative hearing. The juvenile offender or the parent can decline the automatic administrative hearing by submitting a, signed request to: Office of Appeals & Hearing, SLOT N401, P.O. Box 1437, Little Rock, AR 72203. Administrative hearings are conducted telephonically, unless the offender, his parent, guardian, or attorney asks that the hearing be held in person. The request for an in-person hearing must be made within 30 days of this notice and mailed to the Office of Appeals & Hearing (see address listed above).

If the hearing is waived, the offender's name will be placed on the Child Maltreatment Central Registry. Under Arkansas law, persons listed in the Child Maltreatment Central Registry as an offender in a true report are identified upon request to certain classes of public and private persons, including employers and volunteer agencies. As a result, one's employment or ability to provide volunteer services may be adversely affected if their name is placed on the Child Maltreatment Central Registry. If one's name is placed on the Child Maltreatment Central Registry, under certain circumstances, one's name may be automatically removed or one may be able to petition to have their name removed after one year.

The alleged offender's name will not be placed on the Child Maltreatment Central Registry until the receipt of the waiver of the automatic hearing or the day the administrative law judge upholds the true investigative determination.

To obtain a copy of the investigative report, send a \$10.00 check or money order along with a written, notarized request to the Division of Children & Family Services, Central Registry Unit, P.O. Box 1437, SLOT S566, Little Rock, AR 72203. The request must contain your name, address and the names of the child(ren) involved.

You have the right to an attorney. If you cannot afford one, contact Legal Services.

CACD INVESTIGATOR PRINTED NAME

INVESTIGATOR SIGNATURE



Arkansas Department of Human Services
Division of Children and Family Services
Child Maltreatment True Investigative Determination Notice
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To: _____

Address: _____

From: _____

Title: _____

Phone: _____

County Office: _____

Date: _____ **CHRIS Referral #** _____

Re: Name of Alleged Offender: _____

Name of Alleged Victim: _____

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The type of maltreatment was _____.

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 DCFS INVESTIGATOR PRINTED NAME

 INVESTIGATOR SIGNATURE