

REQUEST FOR PROVISIONAL LICENSE

Relicensing staff: \_\_\_\_\_ Agency: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Foster Family Family: \_\_\_\_\_

License Expiration Date: \_\_\_\_\_

Foster Children in the Home: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for provisional request: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Justification why provisional should be granted and action plan to resume licensure.  
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Please include copies applicable contract agreements if a provisional is being requested due to home repairs.

\_\_\_\_\_  
Relicensing Staff

\_\_\_\_\_  
Supervisor