

Child Registration / Update Form (CY 130) Instructions

Submit to	Pennsylvania Adoption Exchange, P.O. Box 4469, Harrisburg PA 17111-0469, fax to 1-717-236-8510.
When to use	<p>To report and update information on children in the custody of county children and youth agencies:</p> <ol style="list-style-type: none"> a. Must be submitted when a child has TPR for 90 days and an intent to adopt has not been filed. b. Can be used for children with a primary or concurrent goal of adoption who do not have TPR. <p>Please contact PAE coordinator for questions about completing the CY 130.</p>
Used By	County Children and Youth Agencies and CSR Agencies
Comments	<ol style="list-style-type: none"> 1. Must submit within 90 days of court terminating child's parental rights. Updates must be submitted within 30 days of a change in any previously reported information and must include the date of change. Note that a child can be registered as soon as their concurrent goal becomes adoption. 2. As defined by the SWAN Bulletin: Pre-adopt families are selected by county agency or court and who intend to adopt a child placed in their home and for whom adoption finalization is pending. Foster-adopt families are approved/licensed families who provide foster care or formal kinship care and who now intend to adopt a child placed in their home for fostering. Child's placement status should not be changed to pre-adopt, foster-adopt or other (kinship-adopt) until family has committed to adopting the child.
Information about the Child Registration / Update Form (CY 130)	
SWAN #	Include the SWAN number assigned by SWAN Prime Contractor (if applicable)
DHS #	For children from Philadelphia, include the county identifying number.
PAE #	If no PAE ID number is assigned, write "none." If unsure whether child has a PAE ID number, contact 1-800-227-0225.
CHILD DEMOGRAPHICS	
Child's Name (Last, First, Middle Initial)	If child is known by more than one last name, list both
Alias	Create an alias name that is not similar to the child's real name (first name only) for children who do not have TPR. This alias will be used in all public documents until TPR.
Date of Birth	mm/dd/year format
Social Security Number	If none, write "none"
Gender	Check the box for male or female.
Race and Ethnicity	<ul style="list-style-type: none"> • Check all that apply. Choices are: American Indian/ Native Alaskan, Asian, Black/African American, Native Hawaiian/Other Pacific Islander, White and Unable to Determine. • Ethnicity: Choices are Hispanic, Non-Hispanic and Unable to Determine
Siblings	<ul style="list-style-type: none"> • If siblings are to be placed with child, enter the name and date of birth for each sibling.
AGENCY INFORMATION	
County Children and Youth Agency	Name of county of custody
County Caseworker	Contact person in county children and youth agency who may be contacted for information about this child
Mailing Address	Agency contact information should include mailing street address or PO box number, city, state and zip code.

E-mail	E-mail address for county contact person
Phone Number	Telephone number with area code of county contact person
Fax Number	Fax number with area code for county agency
Child Specific Recruitment Agency, if different from county agency	Enter agency and caseworker names, mailing address, e-mail, telephone number and fax number
CHILD'S PRIMARY GOAL	
Date Current Goal Established	<ul style="list-style-type: none"> • Court-ordered date of primary goal in mm/dd/year format • If date for goal of adoption is same as TPR, enter court date of TPR.
Goal Under Appeal	If goal is under appeal, check box and provide date appeal was filed
Goal	<ul style="list-style-type: none"> • Enter child's primary goal <ul style="list-style-type: none"> ○ For initial registration, adoption must be either the primary goal or the concurrent goal. If goal of adoption is not established as a primary or concurrent goal, do not complete the CY 130. ○ For updates to CY 130, acceptable goal change choices are Reunification, Adoption, Permanent Legal Custodian (PLC), Fit and Willing Relative, Another Planned Permanent Living Arrangement (APPLA).
CHILD'S CONCURRENT GOAL	
Date Current Goal Established	<ul style="list-style-type: none"> • Court-ordered date of concurrent goal in mm/dd/year format • If date for goal of adoption is same as TPR, enter court date of TPR.
Goal Under Appeal	If goal is under appeal, check box and provide date appeal was filed
Goal	<ul style="list-style-type: none"> • Enter child's concurrent goal <ul style="list-style-type: none"> ○ For initial registration, adoption must be either the primary goal or the concurrent goal. If goal of adoption is not established as a primary or concurrent goal, do not complete the CY 130. ○ For updates to CY 130, acceptable goal change choices are Reunification, Permanent Legal Custodian (PLC), Fit and Willing Relative, Adoption, Another Planned Permanent Living Arrangement (APPLA).
CHILD'S STATUSES	
CURRENT PLACEMENT	
Current Placement:	Choices are Pre-Adoptive Home (kinship), Pre-Adoptive Home (non-kinship), Foster Care (kinship), Foster Family (non-kinship), Institution, Group Home, Supervised Independent Living, Trial Home Visit, Runaway, Other. If none of the listed categories pertain and child is not in permanent placement, select Other and describe other placement
Current Placement Date Established:	Date current placement (i.e. current living arrangement) was established in mm/dd/year format.
Date Child Entered Care	Enter date the child first entered care in county of custody.

TPR STATUS	
Parental Rights Not Terminated / Parental Rights Terminated	Indicate current status of child's parental rights
Date Mother's Rights Terminated	Enter date mother's rights were terminated in mm/dd/year format
Date Father's Rights Terminated	Enter date father's rights were terminated in mm/dd/year format
Parents Deceased	Check if either or both parents are deceased. Provide date of death in mm/dd/year format
Termination Under Appeal	If termination of either or both parent's rights are under appeal, check box.
Date Appealed	List date(s) parental rights were appealed. Note: Date TPR was granted is still required, even if TPR is under appeal or was granted and then immediately appealed.
Does Child Have Adoptive Resource Identified?	Check Yes or No. PAE will explore match for child if No is checked unless goal or TPR is under appeal.
CYS CASE STATUS	
Closed	Check if the county no longer has custody of child and provide date court ordered custody changed. Provide date in mm/dd/year format.
Reason	Check reason for why child is no longer in county custody. Options are: Reunified, Finalized, Guardianship, Living with Relative, Emancipated, Deceased, Transferred to Other Agency (e.g. juvenile probation /MH /MR), Runaway or Other. Please note: "Runaway" may only be indicated if the county agency has been dismissed of responsibility for care and placement. If Other, please enter reason.
Photo Status	
Child Registered with AdoptUsKids?	Check Yes or No. If NO and the child has TPR, PAE will register child on your behalf.
If NO and Child does not...	If No and child does not have TPR, would you like PAE to register child on AdoptUsKids (website). Check Yes or No.
Photographs	<ul style="list-style-type: none"> Picture Attached – Select when photograph is submitted with form. Picture Forthcoming – Select if photograph is not attached to form, but is being forwarded to PAE.
If NO Photo	Check Yes or No if the child should be added to the adoptpakids Web site using a silhouette.
Educational Status	
Check All That Apply	Indicate child's educational status. <ul style="list-style-type: none"> Choices are: Gifted, Special Education, Career and Technical Education, General Education, Alternative Education, Other. If Other is checked, record what other type of education status pertains to this child.

Special Needs	
	<ul style="list-style-type: none"> • Check all appropriate special needs choices for child. Choices are: Abuse History, Alcohol Exposed Infant, Drug Exposed Infant, Emotional Disability, HIV, Mental Health Diagnosis, Intellectual Disability, Multiple Placement History, Neglect History, Physical Disability, Runaway History, Sexual Abuse History, Siblings, Special Education Student, Special Medical Care, Other. • Siblings: Record number of siblings. • Other: Check and describe any other special needs.
Stop Here if No Matches are Needed for This Child If Matches are Needed, Please Complete Entire Form	
Characteristics of Child	
Please Select the Choice That Best Describes the Child	
Health	<ul style="list-style-type: none"> • For each statement, indicate with an X if child has (Yes), does not have (No) or is unknown to have the listed special need. • All questions must be answered.
Education	<ul style="list-style-type: none"> • For each statement, indicate with an X if child has (Yes), does not have (No) or is unknown to have the listed educational need. • All questions must be answered.
Characteristics and Behaviors	<ul style="list-style-type: none"> • For each statement, indicate with an X if child has (Yes), does not have (No) or is unknown to have the listed characteristic and behavior • All questions must be answered.
Connections and History	<ul style="list-style-type: none"> • For each statement, indicate with an X if child has (Yes), does not have (No) or is unknown to have the listed connections and history statement • All questions must be answered.
Contact with Birth Family	<ul style="list-style-type: none"> • For each statement, indicate with an X if child has (Yes), does not have (No) or is unknown to have the described contact with their birth family. • All questions must be answered.
Signature of Representative	<ul style="list-style-type: none"> • The agency with custody of child or CSR worker who is updating the form, certifies that the information recorded is accurate to the best of their knowledge by signing and dating the form. • Initial registration must be submitted by the county of custody. • Affiliates may submit updates
Photo Information	
	<ul style="list-style-type: none"> • Please include a high-quality color photograph for use in family recruitment. • DO NOT send photos printed from desktop printers as they do not reproduce well when scanned. • Please frame the child's face against a plain background.
If this is an update...	If this is an update for a registered child, please include the PAE ID number
If sending by e-mail...	<ul style="list-style-type: none"> • If sending a digital photograph by e-mail: Please use the child's first name and PAE number as the file name. • In the e-mail include the child's date of birth, agency contact person and their telephone number. • File size of digital photos should be between .5 – 1 MB. • All photos must be in the jpg format.
If sending hard copy...	If sending a hard-copy photograph: do not use staples on the child's image.

<p>Narrative Information for Public Website and Recruitment</p>	<p>Please provide the listed information to create the child's PAE narrative. Use positive information only, and do not include mental health diagnoses. Medical or diagnosis information from birth is permissible. All narratives must be at least 125 words and be strength-based. Topics should include:</p> <ul style="list-style-type: none"> • Favorite activities, sports participation, clubs or organizations, movies, food, etc. • Hobbies or pastimes • Special talents, awards or recent accomplishments • Goals child wants to achieve • Educational milestones, grades earned or favorite subjects • Positive relationships with peers, teachers, foster family, siblings, etc. • Dynamics the child would prefer in adoptive family. (i.e. one or two parent household; younger/older/no siblings; animals; rural or urban; religious affiliation, or geographic location) • Contacts that need to be maintained with biological family, siblings.
<p>Additional Information That May Be Shared...</p>	<p>Provide any additional information that can be shared with approved adoptive families interested in this child. This information will not be placed on the Web and will not be shared in publicly.</p>