



CABINET FOR HEALTH AND FAMILY SERVICES
Department for Community Based Services
Division of Protection and Permanency

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PROTECTION AND PERMANENCY TRANSMITTAL LETTER, 24-11

TO: Service Region Administrators
Service Region Administrator Associates
Service Region Clinical Associates
Regional Program Specialists
Family Services Office Supervisors

FROM: Kelli Root, Assistant Director II
Division of Protection and Permanency

DATE: July 2, 2024

SUBJECT: SOP 13.30.2 and DPP-192

The purpose of this transmittal letter is to notify staff of edits to the following SOP:

[SOP 13.30.2 Request for Inspection of Adoption for Identifying Information and Contact With the Birth Family](#)

[DPP-192 Biological Parent Consent form](#)

If you have any questions regarding this transmittal letter, please contact:

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