



<Name>  
 <Address>  
 <Town>  
 <State> <Postcode>

17 February 2015

**Re: Request for the release of information under Chapter 16A of the Children and Young Persons (Care and Protection) Act 1998**

To Whom It May Concern:

Information is being requested from your agency under Chapter 16A of the Children and Young Persons (Care and Protection) Act 1998. Section 245C of the Act allows a prescribed body (the requesting agency) to request another prescribed body to provide it with any information held by the other body that relates to the safety, welfare or wellbeing of an unborn child, a child or young person or a class of children or young persons.

A prescribed body may provide or request information from another prescribed body if it is reasonably believed that providing or requesting the information would assist with the following:

- making any decisions, assessments or plans or initiating or conducting any investigations, or providing a service (relating to the safety, welfare or well-being of the child or young person or class of children or young people), or
- managing any risk to the child or young person or class of children or young people that might arise in the recipient's capacity as an employer or designated agency.

Please provide the information to <caseworker's name> at Marymead NSW Foster Care Program within 3 weeks from the date of receipt either by:

- Fax – (02) 4821 2515
- Email - <caseworker's email>; or
- Post – PO Box 286, Goulburn NSW 2580

Please see the attached form for details of this request for the exchange of information. If you wish to discuss the matter further, please contact the caseworker on <Caseworker's phone #> during business hours.

Yours sincerely,

Lauren Holmes  
 Program Manager  
 NSW Foster Care Program  
 Marymead  
 17 February 2015

## Exchange of information

CHILDREN AND YOUNG PERSONS (CARE AND PROTECTION) ACT 1998 Chapter 16A

### Subject / unborn child

**Name:**

**Sex:**

**Date of birth / age:**

**Address:**

### Subject of information request

**Name:**

**Sex:**

**Date of birth / age:**

**Other identifying information:**

**Relationship to Child/Young  
Person:**

### Request details

**Information required:**

**How the direction is relevant to  
the safety, welfare and  
wellbeing of the Child:**

**Persons informed of exchange  
of information:**

**Persons consented to  
exchange of information:**