

DEPARTMENT OF CITIZENSHIP AND IMMIGRATION
INDIAN AFFAIRS BRANCH☒ CHILD CARE☐ JUVENILE DELINQUENCYINITIAL CHILD PLACEMENT APPLICATION AND
AUTHORITY FORM

Application is hereby made for authority to pay on behalf of
the under-mentioned child at the rate charged by the Child
Caring Agency ☒, or at the rate of \$ 1.90

☒ Daily, ☐ Weekly, ☐ Monthly

PAYABLE TO: ☐ Foster Parent
☒ Child Caring Agency

FILE NO.

16/29-4

DATE

July 3, 1962

AGENCY

Yukon

REGIONAL OFFICE AUTHORITY NO.

2080/62-63/309

FROM

TO

August 1, 1962

Dec. 31, 1962

s.19(1)

CHILD	1. NAME GLADA, Linda		2. BAND Liard River	
	3. BAND NO. [REDACTED]	4. DATE OF BIRTH 1957		5. RELIGION Anglican
	I HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THIS APPLICATION IS WARRANTED AND ACCORDINGLY I AUTHORIZE THE REQUIRED PAYMENTS TO BE MADE. REGIONAL SUPERVISOR			
PARENTS	6. NAME OF MOTHER Leta GLADA		9. NAME OF FATHER Samuel GLADA	
	7. BAND AND BAND NO. Liard River / [REDACTED]		10. BAND AND BAND NO. Liard River / [REDACTED]	
	8. PRESENT ADDRESS <input type="checkbox"/> ON RESERVE <input checked="" type="checkbox"/> OFF RESERVE		11. PRESENT ADDRESS <input type="checkbox"/> ON RESERVE <input checked="" type="checkbox"/> OFF RESERVE	
	12. HAVE ARRANGEMENTS BEEN MADE WHEREBY PARENTS WILL CONTRIBUTE TO THE SUPPORT OF THE CHILD? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
	13. IF NO INFORMATION AVAILABLE RE MOTHER OR FATHER, GIVE NAME AND ADDRESS OF NEXT OF KIN, LEGAL GUARDIAN OR NEAREST RELATIVE			
PLACEMENT BY A CHILD CARING AGENCY OR COURT	14. NAME OF AGENCY Superintendent of Child Welfare, Yukon Territory			
	15. STATUS OF CHILD: <input type="checkbox"/> PERMANENT WARDSHIP <input type="checkbox"/> TEMPORARY WARDSHIP <input checked="" type="checkbox"/> NON-WARD <input type="checkbox"/> JUVENILE DELINQUENT PLACED IN REFORM INSTITUTION			
	16. DATE CHILD ADMITTED TO CARE OR COMMITTED TO A REFORM INSTITUTION January 23, 1962			
	17. IF CHILD APPREHENDED OFF THE RESERVE, GIVE BRIEF RESIDENCE HISTORY			
PLACEMENT BY INDIAN AFFAIRS BRANCH	18. DATE OF PLACEMENT IN FOSTER HOME OR INSTITUTION			
	19. REASONS NECESSITATING PLACEMENT			
	20. WHO REQUESTED PLACEMENT?		21. WHO MADE PLACEMENT?	
	22. HAVE PARENT(S) SIGNED PERMISSION FOR PLACEMENT (FORM IA 3-149)? <input type="checkbox"/> YES <input type="checkbox"/> NO			
	23. PLANS FOR CHILD'S FUTURE (Including education and possible adoption)			
	24. NAME OF FOSTER PARENTS OR INSTITUTION WHERE CHILD IS TO BE, OR HAS BEEN PLACED NAME		ADDRESS <input type="checkbox"/> ON RESERVE <input type="checkbox"/> OFF RESERVE	
	25. RELATIONSHIP OF FOSTER PARENTS TO CHILD		26. FOSTER PARENTS ARE <input type="checkbox"/> INDIAN <input type="checkbox"/> NON-INDIAN (Give band and band number, if Indian)	
	27. BRIEF INDICATION OF FOSTER HOME ENVIRONMENT			

July 3, 1962

DATE

Original signed by
SUPT. YUKON INDIAN AGENCY
INDIAN AGENCY SUPERINTENDENT

• FOR TREASURY USE ONLY •

AUTHORITY NO.

[illegible]

NOTES:

1. Child Caring Agency – includes private agencies, reform institutions and Provincial Departments. Provincial Departments concerned are usually either the Public Welfare Department or the Department of Justice.
2. Completion of Form – When a child is placed by a Child Caring Agency, it will not be necessary to complete that portion of the form entitled "Placement by Indian Affairs Branch". When placed by other than a Child Caring Agency, it will not be necessary to complete that portion of the form entitled "Placement by a Child Caring Agency or Court".



000147

BEST AVAILABLE COPY

Superintendent, Yukon Agency.

166/29-48

Indian Commissioner for E.C.

Dec. 3, 1964.

s.19(1)

Linda GLADA,
No. [redacted] Ross River Band
Authority No. 2080/62-63/109

This is to advise that the expiry date for the above noted
authority has been extended to December 31, 1967.

Will you please change your copies of the Child Placement
Application and Authority form.

J. V. Boys,
Indian Commissioner for E.C.

c.c. Dept.
c.c. B.C. Treasury



DEPARTMENT OF CITIZENSHIP AND IMMIGRATION
INDIAN AFFAIRS BRANCH

AUTHORITY FOR EXPENDITURE

AGENCY

Yukon

FILE NO. AND DATE

166/29-4P

March 30, 1962

VOTE

519

ALLOT.

26-946

F. E. NO.

199

AMOUNT AUTHORIZED

\$ 10.00

DESCRIPTION OF CONTRACT, AGREEMENT OR UNDERTAKING

s.19(1)

Re: Linda GLADA -
No. [redacted] Ross River Band

For payment of air transportation from Watson Lake, Y. T., to Whitehorse, Y. T., child apprehended by Child Welfare officer.

PROVIDE ADVANCE OF

TO: _____ \$ _____

ADDRESS

AUTHORIZED BY:

Indian Commissioner for B. C.

[illegible]

000149

AUTHORITY NUMBER

208/2452-W-61

THIS AUTHORITY MUST BE
QUOTED ON ALL VOUCHERS

COPY 1 - AGENCY

COPY 2 - AGENCY (Return to Branch

COPY 3 - REGIONAL OFFICE
COPY 4 - HEADQUARTERS

1A 1-115
(9-60)

DEPARTMENT OF CITIZENSHIP AND IMMIGRATION

004091

TO: Indian Commissioner for B.C.

OUR FILE: 166/29-4

FROM: Superintendent Yukon Agency

YOUR FILE:

SUBJECT: Linda GLADA,
b.d. [REDACTED] 1957
Liard River Band [REDACTED]

DATE: 28 March 1962

s.19(1)

Attached is account dated March 22 from Supt. of Child Welfare.

Please advise if account is to be paid by our Department and if so return account with authority for vouchering.

Transportation cost was incurred when child was apprehended and brought from Watson Lake to foster home in Whitehorse.



W. E. Grant,
Indian Superintendent.

WEG/ns
encl.



DEPARTMENT OF CITIZENSHIP AND IMMIGRATION
INDIAN AFFAIRS BRANCH
AUTHORITY FOR EXPENDITURE

000151

AGENCY

Yukon

FILE NO. AND DATE

166/29-4P

March 9, 1962

VOTE

519

ALLOT.

26-946

F. E. NO.

199

AMOUNT AUTHORIZED

DESCRIPTION OF CONTRACT, AGREEMENT OR UNDERTAKING

Re: Linda GLADA - b. [REDACTED] .57
No. [REDACTED] Ross River Band

Payment is authorized at the rate of \$1.90 per diem to the Superintendent of Child Welfare for maintenance of the above named child, effective January 23, 1962. Authority expires December, 1965. (Yukon Territory)

s.19(1)

PROVIDE ADVANCE OF

To: _____ \$ _____

ADDRESS

AUTHORIZED BY:

Indian Commissioner for B. C.
SIGNATURE

[illegible]

COPY 1 - AGENCY

COPY 2 - AGENCY (Return to Branch

1A 1-115
(9-60)

when project is completed)

COPY 3 - REGIONAL OFFICE

COPY 4 - HEADQUARTERS

AUTHORITY NUMBER

2080/61-62/186

THIS AUTHORITY MUST BE
QUOTED ON ALL VOUCHERS

166/29-4P

Mr. C.B.H. Murphy,
Supt. of Child Welfare,
P.O. Box 2029,
Whitehorse, Yukon.

P.O. Box 70,
Postal Station 'A',
Vancouver 2, B.C.

February 19, 1962.

Dear Mr. Murphy:

Re: Leta & Samuel GLADA,
No. [redacted] Ross River Band.
Ch: Linda, b. [redacted] 57

s.19(1)

With reference to your letter of January 29 regarding the apprehension of the above-named child, please be advised that this Department will accept maintenance costs at your per diem rate for Linda as of January 23, 1962.

Yours truly,

J. V. Boys,
Indian Commissioner for B.C.

gs

DEPARTMENT OF CITIZENSHIP AND IMMIGRATION

: Indian Commissioner for B.C.

OUR FILE: 166/29-4

FROM: Indian Supt. Yukon Agency

YOUR FILE:

SUBJECT: Foster Home Placement Linda Glada
Ross River Band No. [REDACTED]

DATE: Feb. 8, 1962.

s.19(1)

Attached is an application for Foster Home Placement
for the above noted child.

/pw
Attach:

P. Wilton
W.E. Grant,
pe Indian Superintendent.

166/29-4



CANADA

DEPARTMENT OF CITIZENSHIP AND IMMIGRATION
INDIAN AFFAIRS BRANCH
FOSTER HOME PLACEMENT OF A CHILDDate
Feb. 8, 1962Agency
Yukon

APPLICATION IS HEREBY MADE:

(a) For authority to pay maintenance of the under-mentioned child at the rate of

\$ 1.90 Daily ☒ Weekly ☐ Monthly ☐

(b) To continue payment of maintenance of the under-mentioned child at the rate of

\$ _____ Daily ☐ Weekly ☐ Monthly ☐

Some of the questions on the questionnaire will not be applicable when, for the first time, authority is being requested for the maintenance of a child in a foster home. Indian Superintendents will, therefore, complete answers to only those questions which are applicable.

CHILD

1. Name
Linda Glada2. Band
Ross River3. Band No.
[redacted]4. Date of birth
[redacted], 19575. Date of placement in present home
Jan. 23, 1962

PARENTS

6. Mothers' name
Leta Glada(a) Address
Watson Lake Y.T.(b) Band
Ross River(c) Band No.
[redacted]7. Fathers' name
Samuel Glada(a) Address
Watson Lake Y.T.(b) Band
Ross River(c) Band No.
[redacted]8. State if parents legally married
Yes9. Details of circumstances surrounding placement. (Reasons why placement is necessary. Upon whose request or recommendation, etc.)
This child was in need of protection as reported by Health Nurse & R.C.M.P. Watson Lake. Father appears to be

[redacted] Child was inadequately clothed & very hungry.

Foster home care required until such time as home conditions improve.

10. Is placement a temporary arrangement and will child be returning home in the near future?
Yes

Questions 11 to 15 apply to children for whom it appears foster home care will be recommended permanently or over an extended period of time.

11. Is this the child's first foster home placement? If not, list others and reasons for change.

AUTHORITY NO: 3080/61-62/186

EXPIRY DATE: December 1965

APPROVED:

c.c. Dept.

12. Will his/her best interest be served by continuing in the present foster home indefinitely?

13. Is consent for legal adoption available?

14. Details of general condition and progress as observed during visit

Date of visit _____ 19 ____

15. What are the future plans for the child?

N.A.

FOSTER HOME

16. Name of foster parents
Yukon Supt of Child Welfare

17. Band

18. Band No.

19. Address

20. Relationship to child

21. Rate of maintenance

22. Head office authority

23. Is the standard of living maintained in the home equal to the average of that of others in the community?

24. Do you consider the child is receiving adequate care?
Yes25. Are day school facilities available or will attendance in a residential school for education or other reasons possibly be necessary in the future.
N.A.26. Is there a possibility that at a later date those now providing foster care will wish to adopt this child?
No27. Are they likely to meet provincial requirements if application is made?
N.A.28. Will the child's interests best be served by continuation in foster home care?
Yes29. Is there any reason why adoption is not recommended?
N.A.

N.A.

P. Walton
per Indian Superintendent

IF ADDITIONAL SPACE IS REQUIRED USE REVERSE SIDE OF FORM

000154

166/29-4

s.19(1)



DEPARTMENT OF CITIZENSHIP AND IMMIGRATION
INDIAN AFFAIRS BRANCH
FOSTER HOME PLACEMENT OF A CHILD

Date	Feb. 8, 1962
Agency	Yukon

APPLICATION IS HEREBY MADE:

(a) For authority to pay maintenance of the under-mentioned child at the rate of

\$ 1.00 Daily ☒ Weekly ☐ Monthly ☐

(b) To continue payment of maintenance of the under-mentioned child at the rate of

\$ _____ Daily ☐ Weekly ☐ Monthly ☐

Some of the questions on the questionnaire will not be applicable when, for the first time, authority is being requested for the maintenance of a child in a foster home. Indian Superintendents will, therefore, complete answers to only those questions which are applicable.

CHILD		
1. Name <u>Linda Glada</u>		
2. Band <u>Ross River</u>	3. Band No. [redacted]	
4. Date of birth <u>[redacted] 1957</u>		
5. Date of placement in present home <u>Jan. 23, 1962</u>		
PARENTS		
6. Mothers' name <u>Leta Glada</u>		
(a) Address <u>Watson Lake Y.T.</u>		
(b) Band <u>Ross River</u>	(c) Band No. [redacted]	
7. Fathers' name <u>Samuel Glada</u>		
(a) Address <u>Watson Lake Y.T.</u>		
(b) Band <u>Ross River</u>	(c) Band No. [redacted]	
8. State if parents legally married <u>Yes</u>		
9. Details of circumstances surrounding placement. (Reasons why placement is necessary. Upon whose request or recommendation, etc.) <u>This child was in need of protection as reported by Health Nurse & R.C.M.P. Watson Lake. Father appears to be [redacted]</u> <u>Child was inadequately clothed & very hungry.</u> <u>Foster home care required until such time as home conditions improve.</u>		

10. Is placement a temporary arrangement and will child be returning home in the near future?

Yes

Questions 11 to 15 apply to children for whom it appears foster home care will be recommended permanently or over an extended period of time.

11. Is this the child's first foster home placement? If not, list others and reasons for change.

12. Will his/her best interest be served by continuing in the present foster home indefinitely?

13. Is consent for legal adoption available?

14. Details of general condition and progress as observed during visit

Date of visit _____ 19 ____

15. What are the future plans for the child?

N.A.

FOSTER HOME	
16. Name of foster parents	
17. Band	18. Band No.
19. Address	
20. Relationship to child	
21. Rate of maintenance	
22. Head office authority	
23. Is the standard of living maintained in the home equal to the average of that of others in the community?	
24. Do you consider the child is receiving adequate care?	
<u>Yes</u>	
25. Are day school facilities available or will attendance in a residential school for education or other reasons possibly be necessary in the future.	
<u>N.A.</u>	
26. Is there a possibility that at a later date those now providing foster care will wish to adopt this child?	
<u>No</u>	
27. Are they likely to meet provincial requirements if application is made?	
<u>N.A.</u>	
28. Will the child's interests best be served by continuation in foster home care?	
<u>Yes</u>	
29. Is there any reason why adoption is not recommended?	
<u>N.A.</u>	

P. Walton
Indian Superintendent

BEST AVAILABLE COPY

Superintendent, Yukon Agency.

Indian Commissioner for B.C.

166/29-4P

Linda GLADA, b. [REDACTED] 57
No. [REDACTED] Ross River Band.

s.19(1)

Feb. 9, 1962.

Attached please find copy of Mr. Murphy's letter dated January 29th advising of the apprehension of the above named child on January 23, 1962. Will you please complete an Application for Foster Home Care and forward to this office.

J. V. Boys,
Indian Commissioner for B.C.

gs
Encl.

BF - when
Applic forms rec.
ack. ltr of Jan 29/62



PLEASE QUOTE FILE

C/C

GOVERNMENT OF THE YUKON TERRITORY

P. O. Box 2029,
Whitehorse, Yukon
January 29, 1962.

Mr. J. V. Boys,
Indian Commissioner for B.C.,
P. O. Box 70,
Postal Station "A",
Vancouver 2, B.C.

Dear Mr. Boys:

Re: GLADA, Leta & Samuel
Ross River Band

s.19(1)

Ch: Linda GLADA, b. [REDACTED] '57

Following a report from the R.C.M.P. and the Public Health Nurse at Watson Lake, that the above child was in need of protection, my worker apprehended this child and obtained Consents to Non-Ward care from the parents, Leta and Samuel Glada. Date of apprehension was January 23, 1962.

The child, when apprehended, was inadequately clothed and was very hungry.

The father of this child, Samuel Glada, appears to be

[REDACTED] It is therefore thought by this department that the child should remain in foster home care until some work can be done with the family and the home situation improved.

May we please have your "acceptance of maintenance costs" on behalf of the child Linda Glada.

Yours very truly,

C.B.H. Murphy,
Superintendent of Child Welfare.

pm
The Superintendent,
c.c. Department of Indian Affairs,
Whitehorse, Yukon.

000157

c/c

BEST AVAILABLE COPY

P. O. Box 2029,
Whitehorse, Yukon.
January 29, 1962.

Miss N. O'Brien,
Regional Director of Family Allowances
for the Yukon and Northwest Territories,
Family Allowances Division,
Dept. of National Health and Welfare,
Room 402, Copeland Building,
OTTAWA, Ontario.

Dear Miss O'Brien:

s.19(1)

Re: GLADA, Linda
b.d. [REDACTED] 1957
Parents: Leta & Sam Glada

This is to advise that the above named child was apprehended and taken into Non-Ward care at Watson Lake, Yukon, on January 23, 1962. This child was placed in one of our approved foster homes in Whitehorse, Yukon.

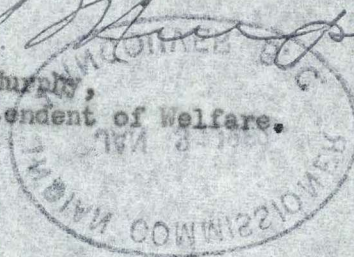
Consents to Non-Ward care were obtained from the natural parents, Mr. & Mrs. Glada and I would ask that payment of family allowance to Mrs. Leta Glada be discontinued immediately.

We are submitting herewith Family Allowances Registration form on behalf of the above named child to be made payable to the Superintendent of Welfare for the Yukon Territory.

Yours very truly,

C.B.H. Murphy

C.B.H. Murphy,
Superintendent of Welfare.



Encl: 1

000158



DEPARTMENT OF CITIZENSHIP AND IMMIGRATION
INDIAN AFFAIRS BRANCH

AUTHORITY FOR EXPENDITURE

AGENCY		FILE NO. AND DATE	
Yukon		166/29-4P <i>Aug. 19</i> <i>July 29, 1960</i>	
VOTE	ALLOT.	F.E. NO.	AMOUNT AUTHORIZED
519	26-946	160	\$ 577.60 60-61
DESCRIPTION OF CONTRACT, AGREEMENT OR UNDERTAKING			693.50 61-62
Re: Linda Glada, No. [redacted] Ross River Band - [redacted] 57			693.50 62-63
			115.90 63-64

Payment is authorized at the rate of \$1.90 per diem to the Government of Yukon Territory for care of the above named effective June 1/60. Authority will expire May, 1963.

s.19(1)

PROVIDE ADVANCE OF	ADDRESS
\$ _____ TO:	

AUTHORIZED BY: B.C. Regional

A/Indian Commissioner for B.C.

[illegible]

Cancelled
eff. July 31/60

COPY 1 - AGENCY

**COPY 2 - AGENCY (Return to Branch
H.Q. through Regional Office
when project is completed)**

COPY 3 - REGIONAL OFFICE

COPY 4 - HEADQUARTERS

AUTHORITY NUMBER
208C/60-61/34 Amended
THIS AUTHORITY MUST BE QUOTED ON ALL VOUCHERS

GOVERNMENT OF THE YUKON TERRITORY

July 7, 1960

BEST AVAILABLE COPY

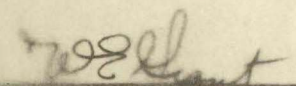
Refers to Invoice #104

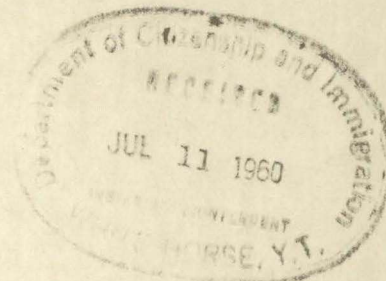
Indian Affairs Branch
P. O. Box 2110
Whitehorse, Yukon

Account for JUNE 1960 - CHILDREN IN TEMPORARY FOSTER HOME CARE

Name	Placement	Period	Days	Rate	Total
ELLIS, Albert George (Roger)	Mrs. R. Osborne	June 28-30	3	1.90	\$5.70
ELLIS, Jennifer	Mrs. R. Osborne	June 28-30	3	1.90	5.70
ELLIS, Mary Ann	Mrs. T. Hubbard	June 1-4	4	1.90	7.60
ELLIS, Mary Ann	Mrs. D. Smith	June 5-30	26	1.90	49.40
FRAZER, Jessie Gale	Mrs. F. Oldham	June 1-30	30	1.90	57.00
→ GLADA, Linda	Mrs. B. Menard	June 1-13	13	1.90	24.70
→ GLADA, Linda	Mrs. L. Cotreau	June 14-30	17	1.90	32.30
JIMMY, Margaret Rose	Mrs. I. Goldsmith	June 24-30	7	1.90	13.30
TOTAL				103	\$195.70

The above named children are certified to
be Indians under the jurisdiction of the
Yukon Indian Agency.


Indian Superintendent.



PLEASE QUOTE FILE



GOVERNMENT OF THE YUKON TERRITORY

P.O. Box 2029
Whitehorse, Yukon
August 3, 1960.

Mr. F.E. Anfield
A/Commissioner of Indian Affairs
P.O. Box 70, Postal Station A
Vancouver 2, B.C.

Dear Mr. Anfield:

Re: GLADA, Linda
b. [redacted] at Whitehorse
Mo: Leta Glada
Fa: Sam Glada
Ross River Band [redacted]

s.19(1)

This is to inform you that the above named child was discharged from the care of Mrs. A. Cotreau into the care of her parents as of August 1, 1960.

Yours very truly

A large, stylized handwritten signature in blue ink, appearing to read "C.B.H. Murphy".

C.B.H. Murphy
Superintendent of Child Welfare.

CBHM:ns
c.c. - Indian Affairs Branch
Whitehorse.

Handwritten initials "Gd" in blue ink, located in the bottom left corner of the page.

BEST AVAILABLE COPY

P.O. Box 2029
Whitehorse, Yukon
August 3, 1960.

Mr. F.E. Anfield
A/Commissioner of Indian Affairs
P.O. Box 70, Postal Station A
Vancouver 2, B.C.

Dear Mr. Anfield:

Re: GLADA, Linda
b. [REDACTED] '60 at Whitehorse
Mo: Leta Glada
Fa: Sam Glada
Ross River Band [REDACTED]

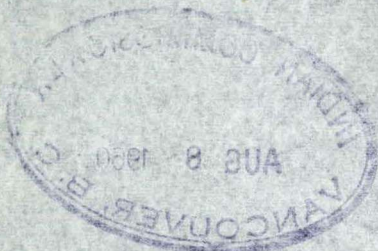
s.19(1)

This is to inform you that the above named child was discharged from the care of Mrs. A. Cotreau into the care of her parents as of August 1, 1960.

Yours very truly

CBHM:ns
c.c. - Indian Affairs Branch
Whitehorse.

C.B.H. Murphy
Superintendent of Child Welfare.





CANADA

DEPARTMENT OF CITIZENSHIP AND IMMIGRATION
INDIAN AFFAIRS BRANCH

AUTHORITY FOR EXPENDITURE

[illegible]

COPY 1 - AGENCY

**COPY 2 - AGENCY (Return to Branch
H.Q. through Regional Office
when project is completed)**

COPY 3 - REGIONAL OFFICE

COPY 4 - HEADQUARTERS

AUTHORITY NUMBER

208C/60-61/34

THIS AUTHORITY MUST BE QUOTED
ON ALL VOUCHERS

s.19(1)

DEPARTMENT OF CITIZENSHIP AND IMMIGRATION
INDIAN AFFAIRS BRANCH
FOSTER HOME PLACEMENT OF A CHILD

File No.

166 /29-4

Date

July 22, 1960

Agency

Yukon

APPLICATION IS HEREBY MADE:

(a) For authority to pay maintenance of the under-mentioned child at the rate of

\$ 1.90 Daily ☒ Weekly ☐ Monthly ☐

(b) To continue payment of maintenance of the under-mentioned child at the rate of

\$ _____ Daily ☐ Weekly ☐ Monthly ☐

Some of the questions on the questionnaire will not be applicable when, for the first time, authority is being requested for the maintenance of a child in a foster home. Indian Superintendents will, therefore, complete answers to only those questions which are applicable.

CHILD

1. Name

Linda GLADA

2. Band

Ross River

3. Band No.

4. Date of birth

1957

5. Date of placement in present home

June 14, 1960

PARENTS

6. Mothers' name

Leta Glada

(a) Address

Upper Liard, Y.T.

(b) Band

Ross River

(c) Band No.

7. Fathers' name

Sam Glada

(a) Address

Essondale Mental Hospt.

(b) Band

Ross River

(c) Band No.

8. State if parents legally married

yes

9. Details of circumstances surrounding placement. (Reasons why placement is necessary. Upon whose request or recommendation, etc.)

This child was abandoned by mother, whose whereabouts were unknown for some time. Father is now _____

Child previously in temporary care of Yukon C.A.S. from May 18 - 31, 1960.

10. Is placement a temporary arrangement and will child be returning home in the near future?

no

Questions 11 to 15 apply to children for whom it appears foster home care will be recommended permanently or over an extended period of time.

11. Is this the child's first foster home placement? If not, list others and reasons for change.

12. Will his/her best interest be served by continuing in the present foster home indefinitely?

13. Is consent for legal adoption available?

14. Details of general condition and progress as observed during visit

Date of visit _____ 19 ____

15. What are the future plans for the child?

FOSTER HOME

16. Name of foster parents

Yukon Supt. Child Welfare

17. Band

18. Band No.

19. Address

20. Relationship to child

21. Rate of maintenance

22. Head office authority

23. Is the standard of living maintained in the home equal to the average of that of others in the community?

24. Do you consider the child is receiving adequate care?

25. Are day school facilities available or will attendance in a residential school for education or other reasons possibly be necessary in the future.

26. Is there a possibility that at a later date those now providing foster care will wish to adopt this child?

27. Are they likely to meet provincial requirements if application is made?

28. Will the child's interests best be served by continuation in foster home care?

29. Is there any reason why adoption is not recommended?

AUTHORITY NO: 208C/60-61/34

EXPIRY DATE:

APPROVED:

c.c. Dept.

Indian Superintendent

IF ADDITIONAL SPACE IS REQUIRED USE REVERSE SIDE OF FORM

000164

NOTE FOR FILE

Re: Linda GLADA

This child was previously in temporary care of Yukon C.A.S. from May 18 - 31, 1960. Authority No. 208C/5-60/34 was issued to cover payment at \$1.90 per diem (14 days)

(See file 166/29-4)