



MISSOURI DEPARTMENT OF SOCIAL SERVICES  
 CHILDREN'S DIVISION  
**WRITTEN SERVICE AGREEMENT (CD14-B)**

Page \_\_ of \_\_

**Goal Development:** For each goal, indicate the corresponding domain(s) from the NCFAS-G+R assessment. It is possible for one goal to address multiple domains.

- Environment
- Parental Capabilities
- Family Interactions
- Family Safety
- Child Well-Being
- Social/Community Life
- Self-Sufficiency
- Family Health
- Readiness for Reunification
- Caregiver/Child Ambivalence

**DOMAIN (from NCFAS-G+R):**

**GOAL 1:**

Tasks to accomplish the goal	Who will do the task?	Time frame?	Date Completed
1.			
2.			
3.			
4.			

**DOMAIN (from NCFAS-G+R):**

**GOAL 2:**

Tasks to accomplish the goal	Who will do the task?	Time frame?	Date Completed
1.			
2.			
3.			
4.			

**DOMAIN(from NCFAS-G+R):**

**GOAL 3:**

Tasks to accomplish the goal	Who will do the task?	Time frame?	Date Completed
1.			
2.			
3.			
4.			

**Family should read and initial each item prior to signing this document.**

\_\_\_\_\_ I and/or members of my family were involved in the development of the above goals and tasks and believe my family will benefit from their completion.

\_\_\_\_\_ I agree with the conditions set forth in this Written Service Agreement.

\_\_\_\_\_ I have been notified of and understand my rights with regard to the service provided to me by the Children's Division.

Family Signature	Date	Family Signature	Date
Worker Signature	Date	Supervisor Signature	Date