

A Multidisciplinary Intervention and Treatment Program for Child Victims of Sexual and Physical Abuse

STATEMENT OF UNDERSTANDING EXTENDED FORENSIC INTERVIEW

I understand that an allegation of child abuse is being investigated regarding my child.*

I agree to cooperate fully with DHR, the NCAC, the involved law enforcement or investigative agency, and the District Attorney's office.

I understand that an Extended Forensic Interview is being conducted with my child as part of the Multidisciplinary Team investigation process. This extended interview will not exceed six sessions. It is my understanding that the DHR caseworker and detective will utilize the information obtained in the Extended Forensic Interview to further the investigation process.

I am aware that the DHR caseworker and detective are available to assist/answer my questions.

I also understand that discussing these allegations with my child may not be beneficial. Thus, I should not repeatedly approach the topic with my child. However, I should be available to assist my child, if he/she introduces the topic and has a need to discuss the allegation.

NAME

WITNESS

DATE

DATE