

# FIRST NATIONS CHILD AND FAMILY SERVICES NOTICE OF DISCHARGE

**PAW number/Fiscal year:**  
493738.BC (2025-2026)

**Purpose:**  
This information is required to determine financial responsibility for the child placement.

**Reporting period:**  
monthly

**Field definitions:**

Field	Definition
<b>A. Child information</b>	
<ul style="list-style-type: none"> <li>- Given name</li> <li>- Family name (legal/aliases)</li> <li>- Gender</li> <li>- Date of birth (YYYYMMDD)</li> <li>- IRS number</li> <li>- Band name</li> <li>- Band number</li> </ul>	<p>The child's given name, family name (legal/aliases), gender, date of birth, Indian Registration number, band name and band number.</p> <p>Dates are in the format of 'Year Month Day'.</p> <p>A valid Indian Registration System number is comprised of 10 digits and in the format '#####'.</p> <p>The band number has a maximum of 5 digits and in the format '#####'.</p>
<b>B. Admission</b>	
Admission	The date on which the child was admitted into care, in the format of 'Year Month Day'.
<b>C. Discharge or transfer</b>	
Discharge	<p>Complete the discharge box if the child is being discharged from care and not being transferred.</p> <ul style="list-style-type: none"> <li>- Date of discharge (in the format of 'Year Month Day')</li> </ul>
Transfer	<p>Complete the transfer box if the child is being transferred to the Province of BC or to another First Nations Child and Family Services agency.</p> <ul style="list-style-type: none"> <li>- Province of BC or name of First Nations Child and Family Services agency</li> <li>- Date of transfer (in the format of 'Year Month Day')</li> </ul>
<b>D. Contact</b>	
<b>FNCFS contact</b>	
<ul style="list-style-type: none"> <li>- Given name</li> <li>- Family name</li> <li>- Telephone number</li> </ul>	<p>The given name, family name and telephone number of the First Nations Child and Family Services contact.</p> <p>A valid telephone number includes the 3 digit area code in the format '###-###-####'.</p>
<b>Child welfare director</b>	

Field	Definition
<ul style="list-style-type: none"> <li>- Given name</li> <li>- Family name</li> </ul>	The given name and family name of the child welfare director
<b>FNCFS agency</b>	
<ul style="list-style-type: none"> <li>- Agency name</li> <li>- Agency number</li> <li>- Date (YYYYMMDD)</li> </ul>	The First Nations Child and Family Services agency name, for any questions about the information and the date that the information was acknowledged, in the format of 'Year Month Day'.