



## EXPEDITED ADMINISTRATIVE REVIEW REQUEST FOR EMPLOYEES, VOLUNTEERS, AND SSCC CONTRACTORS

**Purpose:** An employee, volunteer, or Single Source Contractor Continuum (SSCC) contractor uses this form to request an expedited administrative review of the findings in a CPI investigation in which he or she has been named a designated perpetrator.

**Directions:** Complete the form and mail it to:

Texas Department of Family and Protective Services  
ATTN: ARIF Mail Code W-157  
PO Box 149030  
Austin, TX 78714-9030

This form must be returned within two (2) days from receipt of the Notice of Findings. For questions, contact your CPI caseworker.

The completed form also may be emailed to [CPI ARIF Requests](#)

INFORMATION ABOUT PERSON REQUESTING REVIEW		
Full name:	Phone number (include area code):	
Street address or P.O. Box:		
City:	State:	ZIP code:
CASE IDENTIFICATION		
Case name:	Case number:	
COMMENTS		
Make a short and direct statement about why you disagree with the findings of the investigation:		
SIGNATURE		
Person requesting review:  <div style="font-size: 2em; font-weight: bold; margin-left: 20px;">X</div>	Date signed:	