

DCF RECORD REQUEST

TODAY'S DATE:

ALL REQUESTS MUST BE SUBMITTED IN WRITING. YOU MAY EITHER EMAIL, FAX OR MAIL YOUR REQUEST TO THE FOLLOWING ADDRESS:

DCF Legal Division
Attn: Record Requests
505 Hudson Street
Hartford, CT 06106
Facsimile: 860-920-3013
Email: DCF.RECORDS@ct.gov

You must provide the following information in order for DCF to process your request – print clearly:

Your name: _____ DCF Link Number (if known): _____
Your address: Street: _____
City: _____ State: _____ Zip Code: _____
Your email: _____
Your telephone number: _____
Your date of birth: _____

Please list specific information you are requesting:

Your children's names and date of births:

Were your parental rights terminated? Yes No

(Documents will be sent to the email address you provided. You will be instructed to create a password to open the file.)