

DCF Meeting Form

Date: _____

Name of Union Representative: _____

Name of Member: _____

Contact Information for Union Member: _____ (Phone/email)

Name of DCF Investigator: _____

Contact Information for DCF Investigator: _____ (Phone/email)

Who/What was the DCF claim filed against: _____

(There may be a single individual, multiple individuals or the school or a combination)

Is anyone else at the meeting? Who?

The DCF investigator will read the allegations including the date of the incident that precipitated the DCF claim.

Allegations:

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The DCF investigator will ask a number of questions in relation to the incident. Remind the member that they should ask for clarification if they do not understand a question. They should never answer a question they do not understand. Remind them to answer the question honestly and clearly. If you do not understand the response that a member has made, feel free to question their response for clarification. Your role in the DCF meeting is primarily member support and information gathering. At the end of the questioning period ask the investigator when a decision will be made and how the interested parties will be notified of the decision. The member may wish to have a copy of the decision sent to their home. If that is the case make sure the DCF investigator has their home address. After the meeting request that the member contact the union when they have received the decision.

Questions and Answers
