

**ACKNOWLEDGEMENT OF NONDISCLOSURE OF INFORMATION**

\_\_\_\_\_ has authorized me to be present during the interview with a representative of the Illinois Department of Children and Family Services who is investigating an alleged incident of child abuse or neglect.

I understand that all information divulged during the interview concerning the subjects of the report is strictly confidential under the Abused and Neglected Child Reporting Act (ANCRA), 325 ILCS 5 et seq., and may not be redisclosed except as provided by ANCRA. I further understand that unauthorized disclosure or redisclosure is a Class A misdemeanor punishable by up to 364 days in jail and/or a fine of up to \$1,000.

I hereby acknowledge that my presence during the interview does not constitute authorization to redisclose any confidential information which may be disclosed during the interview.

\_\_\_\_\_  
Representative's Signature

\_\_\_\_\_  
Date

Authorized by

\_\_\_\_\_  
Interviewee

\_\_\_\_\_  
Date