### **APPENDIX I**

# JUVENILE COURT **Juvenile Court Face Sheet**

## CHILD INFORMATION:

Name			λ Λ' 1 11
Last Child also known as	First		Middle
Last SSN:	First		
Birth City/State:			
Before Removal of Child	(if applicable):		
Current Address		City/State	
School and Grade:		School District	t:
BIOLOGICAL PAREN	T INFORMATIO	<u>)N</u> :	
Mother's Name			
Last	First		Middle
Also known as			
Address:	First		Middle
Number/Street		City/State	Zip
Phone Number:		_	*
DOB:G	ender:	Race: Cust	ody Type:
		(legal, shared parer	nting, shared custody)
Mother's Marital Status: (married, divorced, never		_ Interpreter Nec	eded: □ yes □ no
Language:	Interpreter nec	eded for whom:	
Father's Name			
Last	First		Middle
Also known as			N C 1 II
Last	First		Middle
Address:Number/Street		City/State	Zip
Phone Number:			-
DOB: G	ender:	Race: Cust (legal, shared parent)	
Father's Marital Status: _ (married, divorced, never	married, etc)	Interpreter Needed:	□ yes □ no
Language:	Interpreter nee	eded for whom:	

## **<u>CUSTODIAN:</u>** (person with legal custody of the child other than biological parent)

Name				
Last	First		Middle	
Also known as				
Last	First		Middle	
Address:				
Number/Stree		City/State		Zip
Phone Number:		_ SSN:		
DOB:	Gender:	Race:	Custody Type:ed parenting, shared	custody)
Custodian's Marital Sta	atus:	Internre	eter Needed:   yes	
(married, divorced, nev	ver married etc )		otor recaca.   yes	
, ,	, ,			
Language:	Interpreter ne	eded for whom:		
<u> </u>				
PERSON FILING CO	OMPLAINT OR M	OTION:		
Name				
Last	First		Middle	
Also known as				
Last	First		Middle	
Address:		~. /~		
Number/Stree		City/State		Zip
Phone Number:		_ SSN:		
DOB:	Gender:	Race:		
Marital Status:		Interpreter Nee	eded: □ yes □ no	
(married, divorced, nev	ver married, etc)			
Language:	Interpreter ne	eded for whom:_		
Legal Relationship to c	hild:			

#### IN THE COURT OF COMMON PLEAS BUTLER COUNTY, OHIO JUVENILE COURT

Case	Caption (Name of the Case)	Case No
		MOTION FOR VISITATION <u>CODE 730</u>
You	moves the name)	e Court to issue the following order or orders:
Туре	e of order being requested)	
The n	ame and date of birth of the child involv	ved in this motion is:
١AM	E	DOB
Γhe n	ames and addresses of the parties to this	s action are as follows:
l.		you have been known:
	Your Address,	mple: grandmother, uncle, aunt, sister etc. NOTE: ild, you must have a home study prepared before the instructions.)
<b>?</b> .	Said child now resides at	
		Γhis Space is for Court Use Only

3.	Said child's parents and custoo	dians are identified as follows:	
	Mother's Name:		
	Mother's maiden name		
	and/or aliases:		
	Mother's Address:		
	City, State, & Zip		
	Mother's Phone No.:		
	Mother's Date of Birth:		
	School District where		
	mother resides		
	Father's Name:		
	Father's name and/or aliases:		
	Father's Address		
	City, State, & Zip		
	Father's Phone No.:		
	Father's Date of Birth:		
	School District where		
	father resides:		
	Custodian's Name:		
	Custodian's maiden name		
	and/or aliases:		
	Custodian's Address:		
	City, State, & Zip		
	Custodian's Phone No.:		
	Custodian's Date of Birth:		
	School District where		
	custodian resides		
I am	requesting the court to issue this	order:	

The reason that I want the court to issue the order is:
Your signature
NOTICE OF HEARING
A hearing on the above motion will be held on:

IN THE COURT OF COMMON PLEAS JUVENILE COURT BUTLER COUNTY, OHIO

Case No.
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#### **CHILD CUSTODY AFFIDAVIT**

§3127.23 O.R.C.

- This form or a form identical in content to this form must be completed and attached to <u>each party's</u> initial pleading in any child custody proceeding.
- A public children services agency need not complete and attach this affidavit with its pleadings.
- Each party has an ongoing duty to inform the court of any child custody proceeding concerning the child in this or any other state that could affect the current proceeding.

child in this or any other	r state that could affect the current proceeding.	
In Re:(Insert name of child above)		
The undersignedinformation, if reasonably ascerta and belief.	, being duly sworn, state that the following inable, is true and accurate to the best of his or her knowledge, information,	
The child's current address or v     Address:     City/State/Zip      The child has lived with the following and the child has lived with the child has li	vhereabouts is:  lowing persons within the past five (5) years (attach additional page if	
2. The child has lived with the fol necessary):  Name: Relationship to child: Address: City/State/Zip Phone Number: Time period: Name: Relationship to child: Address:	FromTo	
City/State/Zip Phone Number: Time period:	FromTorsons with whom the child has resided within the past five (5) years are as necessary):	
Phone Number: Name: Address: City/State/Zip Phone Number:		
	This Space is for Court Use Only	

concerning the allocation, between the pa of the child including any designation of and legal custodian of the child or that of	party, witness, or in any other capacity in any other proceeding arents of this child, of parental rights and responsibilities for the care parenting time rights and the designation of the residential parent therwise concerned the custody of or visitation with the child. If so, e child custody determination is as follows (attach additional page if
State and County name: Date: Case Number:	
including proceedings for enforcement o violence or protection orders, proceeding	e of any proceedings that could affect the current proceeding, f child custody determinations, proceedings relating to domestic as to adjudicate the child as an abused, neglected, or dependent child, that rights, and adoptions. If so, the court, the case number, and the lows (attach additional page if necessary):
State and County name: Date: Case Number:	
child or claims to be a parent of the child child or to have parenting time rights wit	who is not a party to the proceeding and has physical custody of the who is designated the residential parent and legal custodian of the chird respect to the child or to be a person other than a parent of the child respect to the child. If so, the names and addresses of those persons necessary):
Name: Address: City/State/Zip Phone Number: Name: Address: City/State/Zip Phone Number:	
7. I am requesting that the information c the other party or parties in this action fo	contained in this affidavit be kept under seal and not be disclosed to r the following reason(s):
Sworn to and subscribed before me and i	Affiant/Petitioner  In my presence on
	Notary Public

## IN THE COURT OF COMMON PLEAS JUVENILE COURT BUTLER COUNTY, OHIO

## REQUEST FOR SERVICE

In Re:			
(Insert name of	of child here)		
	of the complaint as filed		e the following person(s) with a y certified mail with return receipt
Address:		Name: Address:	
Name:		Name: Address:	
			e the following person(s) with a y personal service by the sheriff's
Name:		Name: Address:	
	vant respectfully requests rit(s) regarding this reques		e the following person(s) by
Name:		Name:	
Court Date:		Movan	t
	This S	pace is for Cou	urt Use Only

## IN THE COURT OF COMMON PLEAS JUVENILE COURT BUTLER COUNTY, OHIO

Case No.
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## **Affidavit for Service by Publication**

In Re:	Insert name of child here  DOE	: :	
The mo	ovant curate to the best of their know	_, being duly sworn, states that the following information is true ledge, information, and belief.	
1.	That the law requires that the	following person	
2	must be served with notice of		
2.	That the last known address of	f the person to be served is	
3.	That, despite diligent efforts, the last known address of the person to be served could not be found. Those diligent efforts include: (Insert here a description of what was done to attempt to locate said person's last address, for example, contacts with parents, other relatives, searches of public records.)		
4	Those diligent efforts include said person's last address, for	the current address of the person to be served could not be found.  : (Insert here a description of what was done to attempt to locate example, contacts with parents, other relatives, searches of public	
5.	That the names of the parents	of these children are:	
		(father).	
The Sta	ate of,	Movant's Signature , County.	
foregoi	ng affidavit are true to the bes	eing first duly sworn, states that the statements contained in the of his/her knowledge, information, and belief and that the d waiver is his/her voluntary act and deed.	
Sworn	to and subscribed before me o	1:	
		Notary Public	
		This Space is for Court Use Only	