

**IN THE COURT OF COMMON PLEAS
JUVENILE DIVISION
CLINTON COUNTY, OHIO
R.C. 2151.23.3 Jurisdiction Screening**

Please complete one questionnaire per child

Child's Name: _____

First	Middle	Last	DOB
Is the child currently under a safety plan through Child Protection Services? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Is the child currently under Temporary Custody of Child Protection Services? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes to either of the above questions, what County and State? _____			

Child's Mother's Name: _____

First	Last (Maiden)		
DOB: _____	Phone: _____		
Current Address: _____			
Street	City	State	Zip

Child's Father's Name: _____

First	Last		
DOB: _____	Phone: _____		
Current Address: _____			
Street	City	State	Zip

Is Father listed on the birth certificate? Yes No

Child's Custodian/Potential Custodian's Name: _____

First	Last
DOB: _____	Phone: _____
Relationship to Child: _____	

Current Address: _____

Street	City	State	Zip
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How did you receive custody of the above child? _____
What County and State? _____

Protection Orders: Does the Juvenile, Parent, or Custodian have any civil, temporary, or juvenile protection orders issued on their behalf? (*Please provide a copy of the Protection Order(s).*)

Court Name and Location: _____

Type of Order: _____

Name(s) of Protected Party: _____

Order Issued Against: _____

Are the Child's parents currently married to each other? Yes No

Have the Child's parents even been married to each other? Yes No

Child Support Order: Yes No If yes, what County is it ordered through? _____

Custody Order: Yes No If yes, what County is it ordered through? _____

Signature of Person Completing this Form:

_____ Signature	_____ Print Name	_____ Date
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