

STATE OF INDIANA

IN THE _____ COUNTY _____ COURT
(County you live in) (Court staff will write court type here)

COUNTY OF _____
(County you live in)

CASE NUMBER: _____
(Court staff will write your case number here)

IN RE THE MATTER OF:

(Minor child's name)

MINOR CHILD

Child In Need of Services Disclosure Form

1. My name is **(name(s) of petitioners seeking guardianship of minor child)**:

_____.

2. I respectfully file this CHINS Disclosure Form according to IC 29-3-2-7.

3. A petition for guardianship has been filed by **(name(s) of petitioners seeking guardianship of minor child)**:

_____.

4. The parties involved in this guardianship proceeding are found in the chart below **(name(s) of petitioners, the minor child's parent(s) or legal guardian(s), and the custodian who the minor child has lived with for the past sixty (60) days, or any other parties involved)**:

Petitioner #1	
Petitioner #2	
Parent/Legal Guardian #1	
Parent/Legal Guardian #2	
Custodian #1	
Custodian #2	
Other:	
Other:	

5. I have knowledge that **(check all that apply)**:

a party involved in this guardianship case has been determined to be a perpetrator of a substantiated report of child abuse or neglect. The name of the party is **(name of the party who has been involved with reports of child abuse and neglect)**:

_____.

- The minor child(ren) named in the petition for guardianship for this case has/have been the subject of a substantiated report of child abuse or neglect.
- The minor child(ren) named in the petition for guardianship for this case has/have been determined to be child(ren) in need of services under IC 31-34.
- The child(ren) named in the petition for guardianship in this case have been involved in an informal adjustment under IC 31-34-8.

6. I understand my duty under IC 29-3-2-7 to continue to keep the Court informed, in writing, of any changes to this information.

7. I understand that if the information is not given to the Court, a hearing on the petition regarding guardianship may be delayed until the information is provided to the Court.
8. I understand that the Court reviewing the petition to establish guardianship of the child(ren) may request information from the Department of Child Services regarding the guardianship petition or proceedings described in IC 29-3-2-7.
9. I understand that the Department of Child Services is required to provide a response, under seal, to the Court's request for information.

Signature: _____

Date: _____

Printed Name: _____

Signature: _____

Date: _____

Printed Name: _____

Certificate of Service

I certify that the day I filed this form with the court, I mailed a copy of this form to the name(s) and address(es) listed below. I sent this form by (***check the method of delivery/service below***):

- First Class U.S. mail- You can serve the court papers by paying to have them sent by certified mail. The clerk will ask you to complete the Certified Mail card. The clerk will serve the court papers by Certified Mail. Certified mail ensures that the court papers have been signed for and received.
- Hand Delivery- You can serve the court papers by paying to have a sheriff or private company hand- deliver them to the other party. Ask the clerk for information on how to use the Sheriff's office to serve your court papers.
- Indiana's E-Filing System- You can serve the court papers by filing your documents electronically. Ask the clerk for information on how to e-file your court papers.

Provide the information for the minor child's parent or legal guardian below:

Party's name: _____

Party's address: _____

Provide the information for the minor child's other parent or other legal guardian:

Party's name: _____

Party's address: _____

Provide the information for the person that the minor child has lived with for the past sixty (60) days below (if the child has lived with their parent or legal guardian for the past sixty (60) days, leave blank):

Party's name: _____

Party's address: _____

Provide the information for the minor child if they are fourteen (14) years of age or older below:

Party's name: _____

Party's address: _____

Signature: _____

Date: _____