

CHILDREN IN NEED OF SERVICES (CHINS) COMPLAINT

In the Juvenile Court of Pike County, Ga.

Case # _____

(Name of Child in need) DOB _____ Race _____ Sex _____
Age _____ SS# _____

Parent/Guardian whom child lives with) Phone # _____

(Child's Address, City & State) (County)

(School Attending) (Grade)

Does the child receive special education services? NO YES Explain: _____

Mother's Name: _____
(Include Mother's Maiden Name in Parentheses)

Mother's Address: _____
(Street, City/State, Zip)

Home/Cell Phone # _____ Work # _____

Father's Name: _____

Father's Address: _____
(Street, City/State, Zip)

Home/Cell Phone # _____ Work # _____

Legal Custodian: _____

Custodian's Address _____
(Street, City/State, Zip)

Home/Cell Phone # _____ Work # _____

Other household members w/ DOB. If none of the precedings apply, adult relative nearest the court:

Taken into Custody? YES NO Date: _____ Detained? YES NO
Time: _____

(Authorized by: Name & Agency)

Placement of Child _____ Date: _____
Person Notified: _____ Time: _____
Released To/Relation _____ Date: _____
Time: _____

CHINS COMPLAINT

Juvenile Case # _____

1. State the facts supporting this court's jurisdiction: _____

2. State the reason why this complaint is in the best interest of the child: _____

3. Have all available & appropriate attempts to encourage voluntary use of community services by the child's family been exhausted? NO YES Explain: _____

4. State the name of any public institution or agency having the responsibility or ability to supply services alleged to be needed by the child: _____

5. If the complainant is a School District, have you sought to resolve the problem through available educational approaches? YES NO N/A Explain: _____

6. If the complainant is a School District, have you sought to engage the parent, guardian or legal custodian of the child in solving the problem, but such person has been unwilling or unable to do so, that the problem remains, and court intervention is needed? YES NO N/A Explain: _____

7. If the complainant is a School District, has a determination been made that the child is eligible or suspected to be eligible under the federal Individuals with Disabilities Education Act or Section 504 of the federal Rehabilitation Act of 1973? YES NO N/A Explain: _____

8. If the complainant is a School District, have you reviewed the appropriateness of said child's Individual Education Plan (IEP) and placement and made modifications where appropriate? YES NO N/A Explain: _____

9. Is any information required by OCGA 15-11-390(b) unknown? If so, what? _____

Investigating Officer: _____ Phone # _____
Agency: _____ PD Report # _____

Complainants Name _____
Address: _____
(street) (City, State, Zip)

Complainant's Signature _____ Phone # _____ (Date) _____