FULL NAME OF JUVENILE:

Sex: M F Docket No: Date of Original Assignment/Hearing: Date of Disposition: Client's Name (if <u>not</u> juvenile): who is: Mother Father Other:

Petition Date:

JUVENILE ALLEGED TO BE:

Delinquent--33 V.S.A. Section 5102(10) Offense(s): Abandoned or Abused--33 V.S.A. Sec. 5102(3)(A) Without Proper Care--33 V.S.A. Sec. 5102(3)(B) Without or Beyond Parent's Control--33 V.S.A. Sec. 5102(3)(C) Truant--33V5102(3)(D)

PROCEEDINGS AFTER DISPOSITION - Date of Hearing:

Permanency Plan Review Hearing Post-Dispositional Review Hearing Modification of Orders Hearing

TERMINATION OF PARENTAL RIGHTS - Date of Hearing:

DISPOSITION

Dismissed by State Dismissed by Court Diversion Protective Supervision Probation Community Service Treatment Program – Where: Other Disposition:

DCF Custody Vacated Protective Supervision Vacated Conditional Custody Termination of Parental Rights

Custody of DCF – Placement at:

CONFLICT (specify):

Attorney Name:

Attorney Digital Signature:

Date: