TRUMBULL COUNTY COURT OF COMMON PLEAS DIVISION OF DOMESTIC RELATIONS AND JUVENILE DEPARTMENT

Custody Court Inquiry Form

THIS FORM MUST BE COMPLETED AND FILED WITH THE CLERK WITH PLEADINGS IF THE CUSTODY REQUEST IS TO A NON-PARENT AND/OR REQUESTED ON AN EMERGENCY BASIS. The filing of this request DOES NOT release the applicant, counsel, medical provider, or other persons from making a neglect or abuse referral to a child welfare agency under R.C. §2151.421 if they are a mandatory reporter.

NOTE: Please file one form for each set of children who share the SAME mother and father. If parentage is unknown, then a separate sheet is necessary for each child who does not have paternity established.

A. <u>CHILD INFORMATIO</u> Name of child:		Date of Birth:	Last School Attended:	
B. <u>APPLICANT INFORM</u>	IATION:			
Name:	Rela	tionship to the Child(ren):	
Address:				
Telephone No.:		Email address:		
Date of Birth:	Soci	al Security Number: _		
List name(s) and Date(s) of	Birth of all other adult house	hold members who re	side with you:	
	to an existing custody order: s to the question above, pleas		ing information. If you answered	
Name and Address of Court	that issued custody order: _			
Case Number:				

***If the prior order was not issued by the Trumbull County Juvenile or Domestic Relations Court, you <u>MUST</u> attach a copy of the order to this form!

D. <u>CURRENT LOCATION OF CHILD(REN):</u>

prior court order or by operation of law:		
Name:	Telephone No.:	
Address:		
Please provide the following information for the	e person who currently h	as <u>possession</u> of the minor child(ren):
Name:	Telephone No.:	
Address:		
D. <u>PARENT INFORMATION:</u> Is any parent deceased? *If yes, attach death certificate or newsp	□ Yes paper notice of death.	□No
Are the parents currently married to each other?	? □ Yes	□No
1	\square Yes other than the Trumbull (□ No County Domestic Court, attach a copy of
*If the parents were never married to each other paternity for each child unless there is a child Juvenile Court. If so, please provide the exis	l support order or custo	ody order in the Trumbull County
MOTHER		FATHER
Name:		
Address:		
Telephone #:		
Date of Birth:		
SSN:		

Please provide the following information for the person who currently has <u>custody</u> of the minor child(ren) by

E. **SUBSTANTIATING DOCUMENTS**:

If any of the following questions are answered yes, attach for EACH answer that is yes the documents listed in italics following the question.

- Was there police involvement with the children? *Attach police report*.
- Has there been a domestic violence order involving either parent? Attach DV order.
- Does this matter involve medical care or treatment for the children? *Attach medical report, bill or pictures.*
- Was there a child welfare agency involved? Attach an Agency report, letter, directive, or Safety Plan.
- Has any court other than the Trumbull County Juvenile or Domestic Court issued an order regarding these children? *Attach a copy of the court order*.