JUDGE TERRE L. VANDERVOORT

TEMPORARY CUSTODY

Attached is a form packet for a temporary custody procedure. By local rule, the Fairfield County Juvenile Court has adopted the following procedures in a temporary custody action where **all parties are in agreement:**

PLEASE NOTE: THIS WILL NOT BE ACCEPTED WITHOUT AGREEMENT BY BOTH PARENTS

- ♦ Once the attached documents are completed *(must be typewritten)*, the same can be filed with the Fairfield County Juvenile Court between the hours of 8:00 a.m. to 4:00 p.m., Monday through Friday.
- ◆ A \$250 filing fee is required at the time of filing (\$85 will be applied towards costs and the remaining will be placed on deposit for payment of the required home investigation. Any remaining funds will be refunded to the petitioner).
- After the documents have been filed, the Court will schedule an initial hearing in approximately 3 weeks. The court's investigator will contact the petitioners to arrange a mutually convenient time prior to the hearing date to conduct a home investigation.
- If the home investigation is favorable, the Court will grant the entry for temporary custody, the same to be reviewed after one year.
- If the information on the documents is incomplete or the Court has questions concerning the information, an oral hearing will be scheduled and the parties will be required to attend.
- Upon granting an order for temporary custody, the Court will set a non-oral hearing to review the matter for the following year. Notice will be given to the parties. It will be the responsibility of the petitioners to file a request for extension of temporary custody (attaching current waiver and consent of the parties) prior to that review date. If a request for an extension is not filed, the Court will schedule an oral hearing for the parties to appear and advise the Court of the status of the child.
- If, at any time, any of the parties wish to dismiss the temporary custody, said request must be made in writing, signed and filed with the Court. The Court will schedule an oral hearing, at which the parties will be required to attend, prior to ruling on the request.
- If all parties are in agreement that the temporary custody order should be dismissed, a request must be made in writing, signed by all parties and filed with the Court. The Court will review the request and most likely grant the same. In some situations, the Court may first set the matter for an oral hearing.

CHECKLIST

For your convenience, please use our checklist to make sure everything is complete prior to filing with the Court.
Documents are typewritten (Handwritten pleadings will not be accepted as all records are computer imaged and would not be legible)
All information blanks are filled in (If something does not apply or is unknown please indicate)
\$250 filing fee is attached
All signatures have been notarized

A waiver & consent is attached for each parent and petitioner

JUDGE TERRE L. VANDERVOORT

IN THE MA	ATTER OF:	CASE I				
MINOR CH	HILD		ID NO.:			
	COMPLA	INT FOR TEMPO	RARY CUSTODY	<u>(</u>		
NOW COM	MES THE PETITIONER(S), _					
who state((s) the following:					
1.	The above-named minor child was born on and child's social security number is					
2.	The child is related to/has a	significant relatio	nship with the Pet	titioner(s) as fo	ollows:	
	(9	randparent, aunt,	sibling, other)			
3.	This Court has jurisdiction p	ursuant to O.R.C	. 2151.23(A)(2).			
	The required custody afficincorporated herein. The parents of the child are		support workshee	et are attach	ed hereto and	
МС	OTHER:		FATHER:			
ADDRESS:		ADDRESS:				
	TY:		CITY:			
	TATE:	ZIP:	STATE:		ZIP:	
SS	SN:	DOB:	SSN:		DOB:	

- 6. The parents of the child are not able to provide for the proper care and support of this child and it is in the best interest of the child that said child be placed in the temporary care and custody of the Petitioner(s), subject to the continuing jurisdiction of this Court.
- 7. At the time of the preparation of this Complaint for Temporary Custody, the parents and the petitioners are in agreement that the petition should be granted.

WHEREFORE, the petitioner(s) move this Co	urt for an order placing the child in the temporary care
and custody of	, petitioner(s) and designating said
petitioner(s) as the child's legal and residentia	I custodian(s). Further, the petitioner(s) request that a
home investigation be conducted by the Court	and a report of the same be made a part of the record
herein.	
ATTORNEY FOR PETITIONER(S)	PETITIONER
. ,	
Address	Petitioner
City State Zip	Address
Phone Number	City State Zip
Supreme Court Registration No.	Phone Number
Caprollio Court Rogion and Tree	. Helle Hallies
COUNTY OF, ST	ATE OF OHIO.
• • •	e the aforementioned petitioner(s), who being first duly his/her/their free and voluntary act and deed on this
day of, 20	•
, 20	·
	Notary Public/Deputy Clerk

JUDGE TERRE L. VANDERVOORT

IN THE MAT	TER OF:			CASE NO	
MINOR CHIL	.D				
	_		CUSTODY AFFII	DAVIT	
					91 11 2
first duly swo	rn, state that		, am the pare	nt of the above-captioned ch	ild and being
		following place ss and work ba		ng persons during the past fi	ve (5) years <i>(start</i>
DATE FROM	DATE TO	LIVED WITH	RELATIONSHIP	ADDRESS (with city	/ & state)
					_
• 1	do ☐	do not hav	d. ve knowledge of ceeding in this sta	any other state, regarding any parenting, custody, viste or any other state	·
 I do do not know of any person that is not a party to this action that he physical custody of the child or claims to have parental right custody rights or visitation rights. I do do not currently receive financial support or medical benefits for this child 					ve parental rights,
• ' _				om whom:	
	·	ii 30, picasc	nst amount and in	om whom.	
I understand	that, while t	:his action is p	ending, I must inf	orm the court if I learn of a	ny other parenting
action involvi	ng this child.				
				AFFIANT	
COUNTY OF		, \$1	ATE OF OHIO.		
Sworn to and	subscribed I	before me by _		on	20

JUDGE TERRE L. VANDERVOORT

IN THE MATTI	ER OF:			CASE NO.:	
MINOR CHILD					
		_	ETITION FOR TEM	IPORARY CUSTODY ODY ORDER	
free will and ad have each red requesting that	ccord, waive service ceived a copy of	ce of summon the Petition for the placed in the	s and formal notice for Custody filed ne temporary lega	nor child, hereby voluntage of hearing and acknown by the petitioner(s) who have and custody of the care and custody of the ca	owledge that we herein they are
physical or me voluntarily, of o	ntal disability, and	I without threand accord, cor	it or promises have sent to the Court	vears of age or older, ving been made to either entering a Temporary (petitioner(s).	er of us, hereby
Signature of F	Petitioner		Signature of	f Mother	
Signature of F	Petitioner		Address		
Address			City	State	Zip
City	State	Zip	Phone Numb	per	
Phone			Signature of	f Father	
			Address		
			City	State	Zip
			Phone		
COUNTY OF _			_, STATE OF OH	IO, ss.	
				first duly sworn, did sig	
uocument as n	is/nei/their free an	u voluntary ac	st and deed on		20

NOTARY PUBLIC/DEPUTY CLERK

CHILD SUPPORT INFORMATION FORM

CHILD FOR WHOM SUPP	PORT IS	BEING COLLECTED				
NAME:			CASE NO.			
DOB:	SSN:		GENDER:	MF	RACE:	
Support Order:\$		_, plus processing as	to:			
Support Order:\$, plus processing as			to:			
Date of Order:		Effec	tive:			
ORDER BY: JUDGE TER	RRE L. V	ANDERVOORT, Fairfi	eld County 、	Juvenile Court, Lar	ncaster, Ohio 43130	
NAME:						
ADDRESS:						
CITY:				STATE:	ZIP:	
HOME PHONE:		WORK PHONE:		CELL PHONE:		
SSN:	DOB:			RACE:		
MOTHER'S INFORMATIO	N					
NAME:						
ADDRESS:						
CITY:				STATE:	ZIP:	
HOME PHONE:	OME PHONE: WORK PHONE:			CELL PHONE:		
SSN:		DOB:		RACE:		
EMPLOYER:			DATE OF HIRE:			
ADDRESS:			CITY:			
STATE: ZIP:				PHONE:		

INCOME:

FATHER'S INFORMATION

NAME:							
ADDRESS:							
CITY:				STATE	:	ZIP:	
HOME PHONE:		WORK PHO	NE:	CELL F	CELL PHONE:		
SSN:		DOB:		RACE:			
EMPLOYER:				DATE (OF HIRE	:	
ADDRESS:				CITY:			
STATE:		ZIP:		PHONE	Ē:		
INCOME:		, =		1 1 1 2 1 1			
_							
MEDICAL INSURA	NCE INFORMA	TION					
NAME OF INSURED:							
INSURANCE COMPA	ANY:						
ADDRESS:							
				OTATE		710.	
POLICY NO.:	GROUP N	O.:	PLAN TYPE:	STATE:	STAR	ZIP: T DATE:	
INDIVIDUALS COVE	RED:						
INDIVIDUAL OR A	TTODNEY SUB	MITTING IN	IEODMATION				
INDIVIDUAL ON A	TIONNET SOD		II ORMATION				
INDIVIDUAL			ATTORNEY			S. Ct. Reg. No.	
INDIVIDUAL			ADDRESS				
				·			
			CITY			State	
			TELEPHONE				