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- Instructions**
- 1) An adult relative may use this form to petition for the appointment of an immediate temporary custodian of a minor child, if a petition for: a) removal of a guardian, b) termination of parental rights, or c) appointment of a guardian of a minor child who has no guardian has been filed with the court. This form may also be used by an attorney for a minor child or by an adult who is not a relative, but who has actual physical custody of the minor at the time the petition is filed.
  - 2) The petition should be filed in the court for the probate district in which the minor child resides, is domiciled or is located at the time of filing the petition. If the petitioner is requesting immediate temporary custody pending termination of parental rights, the petition may also be filed where the petitioner resides.
  - 3) A Custodian's Affidavit/Immediate Temporary Custody, PC-510, must be filed with the petition unless the minor child is in the custody of a parent and is hospitalized with a serious injury or illness and the parent is refusing or unable to consent to treatment. In this case, a Physician's Certificate/Immediate Temporary Custody, PC-550, must be filed instead of the PC-510. In addition, a birth certificate (long form) and JD-FM-164, Affidavit Concerning Children, should be filed with the petition.
  - 4) For more information, see C.G.S. sections 45a-607, 45a-603 et seq., 45a-706 et seq., 46b-115 et seq. and 52-231a.
  - 5) Type or print the form in ink. Use an additional sheet, or Second Sheet, PC-180, if more space is needed

<b>Probate Court Name</b>		<b>District Number</b>	
<b>In the Matter of</b> (Name of minor child.)		<b>Minor Child's Date of Birth</b>	
Hereinafter referred to as the minor child.			
<b>Address where minor child resides</b>	<b>Address where minor child is domiciled (if different.)</b>	<b>Address where minor child is located at time of filing petition (if different.)</b>	
<b>Tribe and Reservation of Minor Child, if an Indian Child as defined by 25 U.S.C. section 1903</b> (Name and address.)			
<b>Petitioner</b> (Name, address and telephone number.)			

**Petitioner is:** ☐ Adult relative (List relationship and date of birth) \_\_\_\_\_  
☐ Attorney for minor child (Attach Appearance of Attorney, PC-183.)  
☐ Adult with actual physical custody of minor child. (List date of birth and describe circumstances under which the minor came to be in the petitioner's custody): \_\_\_\_\_

**Person(s) to be Removed as Guardian/Parental Rights Terminated.** (For each person, list name, address, telephone number, relationship to the child, date of birth if a parent; whether in the military service of United States or Allied Nation (50 U.S.C. App. 520); Indian tribe and reservation, if a member as defined by 25 U.S.C. section 1903; and whether the person is legally incompetent.)

1.
  - a. Relationship to minor child:
  - b. If parent, date of birth:
  - c. In military service of US or Allied Nation: ☐ Yes ☐ No
  - d. Indian tribe or reservation:
  - e. Legally incompetent: ☐ Yes ☐ No
2.
  - a. Relationship to minor child:
  - b. If parent, date of birth:
  - c. In military service of US or Allied Nation: ☐ Yes ☐ No
  - d. Indian tribe or reservation:
  - e. Legally incompetent: ☐ Yes ☐ No

Hereinafter referred to as the respondent(s).

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If a parent listed above is a minor or legally incompetent, list the parents or guardian/conservator for the parent (Include the name, address, telephone number and relationship.)

1.

2.

Name of parent whose parental rights were previously terminated, if any.

Name of deceased parent (s) or guardians, if any.

☐ The petitioner alleges that the whereabouts of the respondent(s) are unknown.

The last-known address of the respondent(s) is:

The following efforts have been made to obtain the current address for the respondent(s):

**Other Person(s) with Guardianship Rights.** (For each person, list name, address, telephone number, relationship to the child, date of birth, if a parent; whether parent is in the military service of United States or Allied Nation; Indian tribe and reservation, if a member as defined by 25 U.S.C. section 1903; and whether the person is legally incompetent.)

**Parent(s) whose guardianship rights have previously been removed by a court.** (For each person, list name, address, telephone number, relationship to the child, date of birth; whether the parent is in military service of United States or Allied Nation; Indian tribe and reservation, if a member as defined by 25 U.S.C. section 1903; and whether the person is legally incompetent.)

**Minor Child is in the Current Physical Care of:** (Name, address and telephone number. State relationship to minor child.)

**The petitioner represents that:**

- ☐ A petition is pending in this court for the removal of one or both parents as guardians or for the removal of the guardian of the minor child; OR
- ☐ A petition is pending in this court for the termination of parental rights with respect to the minor child; OR
- ☐ The petitioner has reasonable grounds to believe that the minor child has no guardian of his or her person, and a petition for appointment of a guardian is pending.

**The petitioner further represents that:**

- ☐ The minor child is in the current physical care of a person other than the parent or other guardian, subject to the petition for removal of guardianship or termination of parental rights. (If this box is checked, Custodian's Affidavit, PC-510, must be filed with this petition.)

AND

- ☐ The child was not taken or kept from the parent(s) or guardian(s), AND there is a substantial likelihood that the child will be removed from this jurisdiction prior to a hearing for temporary custody; OR
- ☐ To return the child to the parent(s) or guardian(s) would place the child in circumstances that would result in serious physical illness or injury, or the threat thereof, or imminent physical danger prior to a hearing for temporary custody; OR
- ☐ The minor child is hospitalized as a result of serious physical illness or serious physical injury and is in need of immediate medical or surgical treatment, the delay of which would be life-threatening, AND the parent(s) or guardian(s) refuses to consent or is unable to consent to such treatment. (If this box is checked, Physician's Certificate/Immediate Temporary Custody, PC-550, from two physicians must be filed with this petition.)

OR

- ☐ The minor child is in the current physical care of the parent(s) or guardian(s), AND the minor child is hospitalized as a result of serious physical illness or serious physical injury and is in need of immediate medical or surgical treatment, the delay of which would be life-threatening, AND the parent(s) or guardian(s) refuses to consent or is unable to consent to such treatment. (If this box is checked, Physician's Certificate/Immediate Temporary Custody, PC-550, from two physicians must be filed with this petition.)

**The petitioner further represents** that the parent or other guardian has performed acts of omission or commission as set forth in C.G.S. section 45a-610:

- ☐ The minor child has been abandoned by the parent or guardian in the sense that the parent or guardian has failed to maintain a reasonable degree of interest, concern, or responsibility for the child's welfare.
- ☐ The minor child has been denied the care, guidance, or control necessary for his or her physical, educational, moral, or emotional well-being as defined by law.
- ☐ The minor child has had physical injuries inflicted upon him or her by a person responsible for such child's health, welfare, or care, or by a person given access to such child by such responsible person, other than by accidental means, or has injuries which are at variance with the history given of them or is in a condition which is the result of maltreatment such as, but not limited to, malnutrition, sexual molestation, deprivation of necessities, emotional maltreatment, or cruel punishment.
- ☐ The minor child has been neglected or uncared for, as defined in C.G.S. section 46b-120.

AND BECAUSE OF SUCH ACTS, THE CHILD IS SUFFERING FROM SERIOUS PHYSICAL ILLNESS, SERIOUS PHYSICAL INJURY, OR THE IMMEDIATE THREAT THEREOF, OR IS IN IMMEDIATE PHYSICAL DANGER.

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**The petitioner alleges** the following specific acts of omission or commission, which cause the child to suffer serious physical illness or serious physical injury, or the immediate threat thereof, or place him or her in immediate physical danger. Include dates, times, and places.

**The petitioner further represents** that to the best of his or her knowledge and belief:

The minor child ☐ has resided ☐ has not resided in Connecticut continuously for the last six months.

There ☐ is a proceeding ☐ is not a proceeding pending or contemplated in Connecticut or any other state affecting the custody of the minor child.

There ☐ has been a proceeding ☐ has not been a proceeding in the past in Connecticut or any other state affecting the custody of the minor child.

There ☐ is ☐ is not a current safety or service agreement between the Department of Children and Families and the parent/guardian of the minor child.

There ☐ is ☐ is not a current protection order or restraining order involving any party. If so, please attach.

The minor child ☐ is ☐ is not the subject of a pre-existing child support order.

**The petitioner further represents** that it is in the best interest of the minor child that temporary custody of the minor child be granted to a proper person as provided in C.G.S. section 45a-607, pending determination of the:

☐ removal of parent as guardian matter

☐ termination of parental rights matter, or

☐ petition for appointment of a guardian for the minor child, who has no guardian.

**WHEREFORE the petitioner requests** that an order for immediate temporary custody for the minor child be granted to:

\_\_\_\_\_ (Name and relationship to minor child.)

If the court denies the request for immediate temporary custody, the petitioner further requests that the court hold a hearing and order that temporary custody be granted to the person(s) listed above.

**The representations made in this petition are made under the penalty of false statement.**

Signature of Petitioner

Type or Print Name

Date

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**Acceptance of Trust of Temporary Custodian(s)**

**If appointed, I will accept the position of trust:**

Signature of Proposed  
Temporary Custodian

Type or Print Name  
(Include all prior names.)

Date

Address

Phone Number

Date of Birth

Signature of Proposed  
Temporary Custodian

Type or Print Name  
(Include all prior names.)

Date

Address

Phone Number

Date of Birth



Court of Probate, \_\_\_\_\_, District

In the Matter of \_\_\_\_\_, a minor child.

The social security numbers of the following persons are required in connection with this proceeding:

1) Parent(s) to be removed as guardian or whose parental rights may be terminated:

a. Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

b. Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

2) Proposed temporary custodian(s):

a. Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

b. Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_