

REQUEST FOR SHELTER

NAME: Leigh Bierly Has been taken into temporary custody pursuant to Section 78-3a-29 for the condition of:
Date of occurrence: _____
 Failure to Care Lack of Care Dependency Physical Abuse Sexual Abuse Abandonment

It is unsafe to release said child to parents because:
 The child's home condition and/or environment constitutes a danger to the child requiring protective custody.
 Parent or guardian refuses to accept child:
 List specific: add additional information on the following page:
See Page 2

Parents/Guardian/Custodian Were:

Notified as required by Section 78-3a-29. Mr./Mrs. _____, the above child's parent/guardian were notified (by) _____ on (date) _____ (time) _____ that the above child has been received at shelter.
 Not notified because: Unable to locate Non Resident *Parent*
 Shelter Hearing Scheduled for: Date: 4:00pm Time: 1:40pm Place: Sandy Court Step Johnson
 Court/Case Worker notified: Name _____

Identifying Facts:

Full Legal Name of Child: <u>Leigh S. BIERLY</u>	Address: <u>Transient</u>	Sex: <u>F</u>	Race: <u>C</u>	Date of Birth: <u>11</u> / <u>13</u> / <u>JUN 98</u>
Sibling Needing Shelter:	Address:	Sex:	Race:	Date of Birth: / /
Sibling Needing Shelter:	Address:	Sex:	Race:	Date of Birth: / /
<input type="checkbox"/> Father <input type="checkbox"/> Step Father	Address & zip code:	Home Phone:	Work Phone:	Date of Birth: / /
<input type="checkbox"/> Mother <input type="checkbox"/> Step Mother	Address & zip code:	Home Phone:	Work Phone:	Date of Birth: / /
Child living with:	Address & zip code:	Phone:		
Where was child taken into custody?	Address & zip code:	Phone:		
Officer signature:	Department:	Date:		

The undersigned Juvenile Court Officer DHS/OSS Representative authorizes the above named child(ren) to be:
 Subsequent Release Authorized. Date: _____ (time: _____)
 Release to: (name) _____ (relationship) _____
 (address) _____ (date of release) _____

DHS/OSS Staff or Authorized Officer of the Court Date