

NOTIFICATION TO COURT OF OUT-OF-TOWN/NONRELATIVE PLACEMENT

DCF-3009

9/26 (Rev.)

Address of Court:				Date:	
Please Select Juvenile Court Address					

Child LAST Name:	Child FIRST Name:	DOB:	Gender: Select One or enter your own		
Address BEFORE Removal (No. and Street):	Apt. #:	City:	State:	Zip:	

Parent #1 LAST Name:	Parent #1 FIRST Name:	E-mail:	Phone:		
Parent #1 Address (No. and Street):	Apt. #:	City:	State:	Zip:	

Parent #2 LAST Name:	Parent #2 FIRST Name:	E-mail:	Phone:		
Parent #2 Address (if different from Parent #1 above):	Apt. #:	City:	State:	Zip:	

Legal Guardian LAST Name:	Guardian FIRST Name:	E-mail:	Phone:		
Guardian Address (No. and Street):	Apt. #:	City:	State:	Zip:	

Pursuant to CGS 46b-129(b), as amended by PA 26-26, this is to inform the court that above referenced child has been placed with (check the box/es that apply):

☐ a person other than a relative or fictive kin caregiver

☐ outside the town where the child resides

for the reason(s) indicated below:

☐ Appropriate relative or fictive kin placement not available.

☐ No appropriate placement was available in the town where the child(ren) reside(s) at the time of removal.

☐ Parents were advised of the placement and did not object.

☐ Other _____.

This notice confirms that the placement selected for the above referenced child serves the best interest of the child.

SW LAST Name:	SW FIRST Name:	SW Signature:	Date
SWS LAST Name:	SWS FIRST Name:	SWS Signature:	Date