Superior Court for Juvenile Matters at: (address)

Date: (day, month, year)

**SOCIAL STUDY IN SUPPORT OF NEGLECT / UNCARED FOR / ABUSED PETITION**

**[NOTE: DO NOT REPEAT INFORMATION IN MORE THAN ONE SECTION]**

**SECTION A. Demographics**

Child/ren for Whom Petition is Filed [List each one separately]

* Name:
* Address:
* Date of Birth:
* Indian Tribe:
* Parentage: Adjudicated / Not Adjudicated

[**Note**: Dates of Birth need to be verified through birth certificates. Please put "verified" next to any date of birth for whom you have a birth certificate.]

Parent 1:

* Name:
* Address [or last known address]:
* Date of Birth:
* Prison Identification Number [if applicable]:
* Indian Tribe:

Parent 2:

* Name:
* Address [or last known address]:
* Date of Birth:
* Prison Identification Number [if applicable]:
* Indian Tribe:

Legal Guardian [delete if not applicable]

* Name:
* Address [or last known address]:
* Date of Birth:
* Prison Identification Number [if applicable]:
* Indian Tribe:

Court Intervenor [delete if not applicable]

* Name:
* Address [or last known address]:
* Date of Birth:
* Prison Identification Number [if applicable]
* Indian Tribe:

Minor Sibling(s) for Whom Petition is not Filed [name each separately]:

* Name:
* Address / Current placement:
* Date of Birth:
* Current legal status:

**SECTION B. Legal / DCF History**

1. **Parentage:** [explain if parentage has been established. If it has not, state what actions are being undertaken to establish parentage]
2. **Native American Ancestry:** [If applicable, describe what efforts the Department has made to notify the relevant tribal nations per ICWA]
3. **Family / Probate / Criminal Court orders or Restraining Orders:**
4. **Previous history with DCF or any other child welfare agency:** [Be very concise.]
5. **Previous history with Superior Court for Juvenile Matters:** [Include dates of all neglect and TPR determinations.]
6. **Subsequent Reports, Investigations, and New Criminal Charges**:[List any new reports, including non-accepted reports alleging abuse or neglect pertaining to the child(ren) or a parent of the child.  Include whether the report resulted in an investigation and include the findings of the investigation.  Include any new criminal charges filed against any parent.]
7. **Dates of Administrative Case Reviews and Permanency Team Meetings:** [List all ACRs and PTMs to date]

**SECTION C: Reason for Current Petition** [Describe the facts leading to the filing of petitions and/or removal of the child.]

Do not cut and paste affidavit, protocol, or summary of facts.

Describe any significant events using dates, places, sources of information etc. This section should include the details that support the allegations of neglect.

**SECTION D. Reasonable Efforts to Prevent Removal** [List efforts for each parent separately. Include dates referral(s) were made.]

Parent 1:

Parent 2:

[NEW PAGE]

**SECTION E. Family History**

1. Summary: [Include each parent and child. Include only family history that is relevant to the current circumstances. Include source and date of information provided.]

Parent 1:

Parent 2:

Children (list each one separately):

1. Relative resources and other social supports: [List all relatives and other persons considered for placement, when they were identified, and why child is not placed with them.]

[NEW PAGE]

**SECTION F. Current Assessment** [Connect the assessment to the family’s social history: Provide a summary of each parent's progress to date, include all referrals made to date on behalf of each parent and their compliance and insight gained from each service.]

Parent 1:

Parent 2:

Child: [List each child separately and include the following:

* 1. The most up to date information concerning the child's medical, dental, developmental, educational and treatment needs from any relevant providers, include the source and the date of the information provided.
  2. Whether the child has received services recommended by any such providers, and a description of any concerns identified by such providers
  3. For any child under three years of age, state whether the child was screened for developmental and social-emotional delays, whether delays were identified, and if so, whether the child was referred to the birth-to-three program]

**SECTION G. Current Placement (If applicable)**

[Describe type of placement (specify whether it's a licensed home or home eligible for licensure, and whether any applicable waivers have been obtained), relation of caregivers and other household members. Give the court a good picture of each child’s current placement.]

**SECTION H: Visitation (If applicable)** [Provide the current visitation schedule for the child with his or her parents and siblings.]

**SECTION I: Qualified Residential Treatment Program (If applicable)**

1. Provide the assessments undertaken including the strengths and needs of the child/youth which support that the child/youth’s needs still cannot be met through placement in a home setting
2. Explain why QRTP continues to provide the most effective and appropriate level of care in the least restrictive environment
3. Explain why QRTP remains consistent with short- and long-term goals per permanency plan
4. Provide specific treatment or service needs that will be met for the child/youth in QRTP
5. Include the length of time the child/youth is expected to need the treatment or services
6. Indicate the efforts made to prepare the child/youth to return home or to be placed with a fit and willing relative/kinship resource, a legal guardian, an adoptive parent or foster parent after discharge

**SECTION J. Child's Perspective**

[Describe child’s reaction to reunification efforts, child’s bond to caregivers, child’s adjustment to placement, child’s preference of living arrangements, other relevant information from child’s case plan. Include child’s stated position, if age appropriate.]

[NEW PAGE]

**SECTION K. Recommendations (Select as applicable)**

1. It is the recommendation of the Department of Children and Families that the court adjudicate the child as neglected/uncared for/abused.
2. It is further recommended that the child be committed to the care and custody of the Commissioner of DCF.

OR

It is further recommended that the child remain with (mother/father) under a period of protective supervision for 3, 6,9,12 months.

OR

It is further recommended that the court transfer guardianship of the child to [name of proposed guardian] who is/are [a] suitable and worthy caretaker(s), [with or without an order of protective supervision for (3,6, 9 or 12) months].

OR

It is further recommended that on behalf of [name of child(ren)], the court order sole/joint legal custody to [name of parent or parents] and sole/joint physical custody to [name of parent or parents] with rights of visitation as follows: [state visitation plan].

1. The Department also recommends that the court order specific steps.

Submitted by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

, Social Worker (860-000-0000)

DCF, 505 Hudson Street, Hartford CT 06106

Email: @

Reviewed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

, Social Work Supervisor (860-000-0000)

DCF, 505 Hudson Street, Hartford CT 06106

Email: @

Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

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