

Juvenile-Family Crisis and Out-of-Home Placement Petitions

Directive #5-91

Issued by:

Robert D. Lipscher

Administrative Director

Rules 5:15-2 and 5:18(c) provide that Juvenile-Family Crisis and Out-of-Home Placement petitions be made under oath and in a form prescribed by the Administrative Director of the Courts. Attached are new Juvenile-Family Crisis and Out-of-Home Placement petitions. Effective immediately, these petitions shall be used in all Juvenile-Family Crisis and Out-of-Home Placement Cases. These petitions supersede all previous Juvenile-Family Crisis and Out-of-Home Placement petitions.

The petitions were prepared in consultation with Juvenile-Family Crisis Intervention Unit Directors and the Conference of Family Division Presiding Judges to comply with S-3168, which became effective on January 12, 1990. S-3168 amended *N.J.S.A. 2A:4A-87(b)* to require that Out-of-Home placement petitions "...include documentation of the attempts made to provide alternate living arrangements...."

Please note the following differences from the dual purpose Juvenile-Family Crisis and Out-of-Home Placement petition in the CIU Manual.

1. Item 7 has been added so that Intake can document exhaustion of alternate living arrangements as required by S- 3168.
2. The petitioner's oath has been replaced with a certification pursuant to *R. 1:4-4(b)* in order to facilitate completion of the petitions.
3. Additional changes have been made in the format and language of the petitions to comply with the requirements of *R. 1:4*, and the recommendations of the Family Division Practice Committee.

NOTE

No change has been made to the original text.

Filed By: _____ County Court Intake Service
Address: _____

Telephone _____ () _____

The State of New Jersey in the interest of

SUPERIOR COURT OF NEW JERSEY
CHANCERY DIVISION, FAMILY PART

the Family of

COUNTY OF:
DOCKET NO:

CIVIL ACTION
JUVENILE-FAMILY CRISIS PETITION

The undersigned petitioner _____
First Name Last Name
of the _____ County Court Intake Services upon certification alleges to the best of his/her
information and belief that:

1. The juvenile involved in the matter is:

(Name) (Address)

(Telephone) (Date of Birth) (School Attended)

(Address of School) (Telephone of School)

2. The parent(s) or guardian(s) of the juvenile are:

(Name) (Address) (Date of Birth) (Telephone)

(Name) (Address) (Date of Birth) (Telephone)

3. The above name juvenile is in the custody of:

(Name) (Relationship) (Telephone)

4. Others contributing to the Juvenile-Family Crisis are:

NAME	Relationship	Date of Birth	Address
_____	_____	_____	_____
_____	_____	_____	_____

5. The above-named family and juvenile, on () personal knowledge () information supplied by _____, of the _____, are in a juvenile-family crisis in that on or about _____, at _____ m. (time) the above-named family and juvenile did: (Set forth the facts describing the nature of the juvenile-family crisis, including the manner and place of the behavior, conduct or condition alleged as the basis for the juvenile-family crisis.)

6. The following appropriate community services have been attempted and have proved to be unsuccessful for the reasons set forth:

7. The following attempts have been made to provide alternate living arrangements:

Persons Contacted	Relationship	Response	Agreement by Juvenile and/or Parents/Guardians
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

8. Recommendations for resolving the juvenile-family crisis, or making an out-of-home-placement, as set forth by the Juvenile-Family Crisis Intervention Unit: (Set forth community services and programs to implement family crisis recommendations, or the plan for out-of-home placement. Include recommendations and/or needed services for the family as a whole, the juvenile, parents/guardians and for individuals contributing to the juvenile-family crisis, e.g., drug and alcohol abuse, etc.)

_____ (Type Name) _____ Court Intake Services
(County)

By: _____ (Signature)
(Petitioner from Intake Service)

_____ (Type Name)

Certification (Rule 1:4-4(b))

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

DATED:

Signature of Petitioner

Name	Relationship	Witnesses to be Called Address	Telephone
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Additional Information may be attached hereto.)