

**SUPERIOR COURT OF WASHINGTON
 COUNTY OF SPOKANE
 JUVENILE COURT**

In the Interest of:

D.O.B.:

No:

**CHILD IN NEED OF SERVICES (CHINS)
 PETITION
 (PTCIN)**

I. BASIS

I represent to the court the following:

1.1 Identification of the parents or legal custodians and guardians:

Name	1	2
Date of Birth		
Home Address		

Marital status of biological parents: _____

Name of Legal Custodian: _____

1.2 Child alleged to be in need of services:

Name	
Date of Birth	
Sex	
Home Address	

Race: Asian/Pacific Islander Black/African American Hispanic
 American Indian/Native Alaskan White/Caucasian Unknown

1.3 Child's Indian status:

- Does not apply because the Department of Social and Health Services is not the petitioner.
- The petitioner knows or has reason to know that an Indian child is involved.
- The Department of Social and Health Services is the petitioner. The Washington State Indian Child Welfare Act applies.

1.4 Petitioner is:

- the child.
- the parent, who is a resident of **Spokane County**.
- the Department of Social and Health Services.

1.5 Have any immediate family members ever been (past or present) the subject of any of the following proceedings (check all that apply):

- Dependency
- Divorce
- Legal Separation
- Custody
- Paternity
- Civil Domestic Violence

1.6 The child is in need of services, as defined in RCW 13.32A.030(5), in that:

- a. the child is beyond the control of his/her parent(s) such that the child's behavior endangers the health, safety, or welfare of the child or other person;
- b. the child has been reported as absent without consent for at least 24 consecutive hours on two or more separate occasions from the parent's home, a crisis residential center, an out-of-home placement, or a court-ordered placement; and
 - has exhibited a serious substance abuse problem; or
 - has exhibited behaviors that create a risk of serious harm to the health, safety, or welfare of the child or any other person; or
- c. the child is in need of necessary services including the following:
 - food
 - shelter
 - healthcare
 - clothing
 - education
 - services designed to maintain or reunite the family

Additional information may be attached on a separate piece of paper.

1.10 A suitable out of home placement resource is available.

II. RELIEF REQUESTED

2.1 I request that the court order out-of-home placement of the child.

III. CERTIFICATION

3.1 I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Dated at _____, Washington on _____.
(Place) (Date)

Signature

Type or Print Name

Address

Telephone