

Court: <input type="checkbox"/> District <input type="checkbox"/> Juvenile Colorado County: _____ Mailing Address: _____	<i>Event Code: RAFF This box is for court use only.</i>
Parties to the Case: Petitioner: The People of the State of Colorado In the Interest of: _____ & Respondents: _____	
Filed by: Name: _____ Mailing Address: _____ Phone _____ Fax: _____ Email: _____ Bar Number: _____ <small>(For lawyers)</small>	Case Number: _____ Division: _____ Courtroom: _____
Relative Information <i>(Delinquency Cases)</i>	

1. Background

Colorado Courts understand that family, friends, kin,* and community support are important for youth.

The people you list may be contacted to provide more support, serve as a placement for the youth, or to provide a break for your family.

Parents and legal guardians must complete this form as completely as they can. Please update any missing information as soon as possible.

The law that directs this process is C.R.S. § 19-2.5-303(3)(b) and 501.

*Note Kin are people with a significant relationship to the youth.
Or, people the family would consider "family-like."

2. Your Info

My name: _____.

I am the youth's: Parent Legal Guardian Other*

* Explain why a parent or guardian didn't fill out the form:

Note on Confidentiality

In addition to the Court, other case professionals may get a copy of this form.

This can include lawyers on the case, a Guardian Ad Litem (GAL), or the County Department of Human Services (DHS).

Someone with a valid court order, subpoena, release of information (RoI), and those who qualify under C.R.S. § 19-1-304 may also view this form.

3. Relative Info

List every grandparent, relative, kin, and other people that have a significant relationship with the youth:

1) Full Name: _____

Their Relationship to the Youth: _____

Home Address: _____

Phone Number: _____

Email: _____

Do you want this person's involvement or support in this case? Yes No

Can the youth stay with this person for short breaks? Yes No

Can the youth live with this person if outside placement is needed? Yes No

Comments on this person as potential support or placement: _____

2) Full Name: _____

Their Relationship to the Youth: _____

Home Address: _____

Phone Number: _____

Email: _____

Do you want this person's involvement or support in this case? Yes No

Can the youth stay with this person for short breaks? Yes No

Can the youth live with this person if outside placement is needed? Yes No

Comments on this person as potential support or placement: _____

3) Full Name: _____

Their Relationship to the Youth: _____

Home Address: _____

Phone Number: _____

Email: _____

Do you want this person's involvement or support in this case? Yes No

Can the youth stay with this person for short breaks? Yes No

Can the youth live with this person if outside placement is needed? Yes No

Comments on this person as potential support or placement: _____

4) Full Name: _____

Their Relationship to the Youth: _____

Home Address: _____

Phone Number: _____

Email: _____

Do you want this person's involvement or support in this case? Yes No

Can the youth stay with this person for short breaks? Yes No

Can the youth live with this person if outside placement is needed? Yes No

Comments on this person as potential support or placement: _____

5) Full Name: _____

Their Relationship to the Youth: _____

Home Address: _____

Phone Number: _____

Email: _____

Do you want this person's involvement or support in this case? Yes No

Can the youth stay with this person for short breaks? Yes No

Can the youth live with this person if outside placement is needed? Yes No

Comments on this person as potential support or placement: _____

6) Full Name: _____

Their Relationship to the Youth: _____

Home Address: _____

Phone Number: _____

Email: _____

Do you want this person's involvement or support in this case? Yes No

Can the youth stay with this person for short breaks? Yes No

Can the youth live with this person if outside placement is needed? Yes No

Comments on this person as potential support or placement: _____

7) Full Name: _____

Their Relationship to the Youth: _____

Home Address: _____

Phone Number: _____

Email: _____

Do you want this person's involvement or support in this case? Yes No

Can the youth stay with this person for short breaks? Yes No

Can the youth live with this person if outside placement is needed? Yes No

Comments on this person as potential support or placement: _____

To list more family and kin, attach pages as needed.

4. Sign & Date

Signature

Date