

**TRUMBULL COUNTY FAMILY COURT
JUVENILE FAMILY INFORMATION SHEET**

INSTRUCTIONS: PURSUANT TO TCFC Loc.R. 33.01(B)(3), THIS FORM MUST BE COMPLETED AND FILED WITH THE COURT UNDER *EACH SEPARATE CASE* WITH ALL INITIAL AND POST-DECREE JUVENILE PLEADINGS. *THE ENTIRE FORM MUST BE COMPLETED.* IF THE INFORMATION IS NOT AVAILABLE, INDICATE "N/A" OR "UNKNOWN." IF THE INFORMATION IS PROTECTED PURSUANT TO COURT ORDER, INDICATE "PROTECTED" OR "CONFIDENTIAL."

JUVENILE COURT CASE NO: _____

COMPLAINANT/PETITIONER:

Name: _____
Address: _____

Phone No.: _____
Email: _____
Relationship to Child(ren): _____

CHILD(REN)'S INFORMATION:

NAME:	DATE OF BIRTH:
_____	_____
_____	_____
_____	_____
_____	_____

MOTHER:

Name: _____
Address: _____

Phone: _____
Email: _____

FATHER:

Name: _____
Address: _____

Phone: _____
Email: _____

ADDITIONAL PART(IES):

Name: _____

Address: _____

Phone No.: _____

Email: _____

Relationship to Child(ren): _____

Name: _____

Address: _____

Phone No.: _____

Email: _____

Relationship to Child(ren): _____