

**JUV-2 Dependency Complaint**

**DEPENDENCY  
COMPLAINT  
IN THE JUVENILE COURT OF  
\_\_\_\_\_ COUNTY, GEORGIA**

File #:

Name of physical custodian of alleged dependent child(ren) (Last, F, M):		Age: _____
		DOB: _____
Race: _____	Relationship to	Res Phone: _____
Sex: _____	Child(ren): _____	Bus Phone: _____
Address where alleged dependent child(ren) reside, dependency occurred or is located without a custodian:		
(Street)	(City)	(County) (State) (Zip)
Name of other custodian of the alleged dependent child(ren), (Last, F, M):		Age: _____
		DOB: _____
Race: _____	Relationship to	Res Phone: _____
Sex: _____	Child(ren): _____	Bus Phone: _____
Mother of		Res Phone: _____
Child(ren):		Bus Phone: _____
(Include Mother's Maiden Name in Parentheses)		
Mother's Address:		
(Street)	(City)	(County) (State) (Zip)
Legal Father's Name:		Res Phone: _____
		Bus Phone: _____
Legal Father's Address:		
(Street)	(City)	(County) (State) (Zip)
Putative Father's Name:		Res Phone: _____
		Bus Phone: _____
Putative Father's Address:		
(Street)	(City)	(County) (State) (Zip)
Putative Father's Name:		Res Phone: _____
		Bus Phone: _____
Putative Father's Address:		
(Street)	(City)	(County) (State) (Zip)
Each child's name, age, date and place of birth, and father's name:		
_____		
_____		
Taken Into Custody: Yes ( ) No ( )		
By Whom:		
(Name)	(Agency)	
Placement of Dependent Child:		Date: _____
		Time: _____

Person Notified: _____	Date: _____	
By: _____	Via: _____	Time: _____
Detained: Yes ( ) No ( )	Place _____	Date: _____
Authorized By: _____	Detained: _____	Time: _____
Released To: _____	Date: _____	
Relation: _____	Time: _____	

1. State the facts of the dependency:

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2. If the child(ren) are not legal residents, how did they get into the U.S. and in your custody?

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3. If the legal parent(s)' whereabouts are unknown, state all efforts made in your diligent search to find them and/or the name and address of any known adult relative nearest the court.

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4. Is the child(ren) subject to the Indian Child Welfare Act? Yes/No:

5. Is any information required by O.C.G.A. § 15-11-152 unknown? Yes/No:

6. Are the parents capable of paying child support and should be ordered to do so? Yes/No:

Investigating Officer: _____	Agency: _____ P.D. Report #: _____	Phone #: _____
Complainant's Name: _____	Complainant's Address: _____ _____	Res Phone: _____
Signature: _____	Date: _____	Bus Phone: _____