Connecticut Department of Children and Families AFFIDAVIT SEEKING OUT-OF-HOME PLACEMENT OF A CHILD

DCF-1999 3/19 (Rev.)



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In RE:	Child or Childrenis Names:					Date:
Superior Court for Juvenile Matters at: Juvenile			Matters District:	Address	of Court:	1
I,	Name of DCF Social Worke			·	of the Department of Children sworn, do hereby state that:	and Families being duly
1. That continuation in the home is contrary to the welfare of the child because of the following conditions:						
AND						
2. Prior to placement, the following reasonable efforts were made to prevent placement:						
OR						
3. Reasonable efforts to prevent placement were not possible because:						
DCF SW LAST Name: DCF SW		DCF SW FIRS	ST Name:	DCF Social Wo	orker Signature:	Date:
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					Signature of Judge or Assistar	t Clerk (if necessary):
Signed and sworn to before me on this date: day of, 20					— Jighatare of stage of 7 bolotar	it clost (ii necessary).
Notary Signature: Notary License Expiration Date:					Area for Notary Seal:	
Notary Signature.			Trotary License Expiration Date.		Area for Notary Seal.	