

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

IN THE INTEREST OF

Name

Date of Birth

**Request to
Change Placement /
Revise Dispositional Order**

Case No. _____

I REQUEST THE COURT: *(Check all that apply in 3-4)*

1. I am interested as
- | | | |
|--|--|--|
| <input type="checkbox"/> Caseworker | <input type="checkbox"/> District Attorney/Corporation | <input type="checkbox"/> Guardian ad Litem |
| <input type="checkbox"/> Child/Juvenile or Counsel | <input type="checkbox"/> Parent | <input type="checkbox"/> Expectant Mother |
| <input type="checkbox"/> Other: _____ | | |

2. The Indian Child Welfare Act does not apply. For an Indian child, use the ICWA version of this form (IW-1766).

3. **Change the Placement of the child/juvenile.**

A. The child/juvenile is currently under a temporary physical custody order. dispositional order.

- B. This request to change placement is
- in-home to out-of-home. *This applies after an Emergency Change in Placement Hearing.*
 - out-of-home to out-of-home.
 - out-of-home to in-home.
 - in-home to in-home.

C. Name and address of proposed placement: _____

D. Date of proposed change in placement: _____.

E. Describe the reasons for the new placement, why it is preferable, and how it satisfies any treatment plan or permanency plan. **See attached**

F. The proposed change in placement would move the child/juvenile from in the home to a placement outside of the home.

1) Placement in the home at this time is contrary to the welfare of the child/juvenile because:

2) Reasonable efforts to prevent removal were *(Complete one of the following)*

made by the department or agency responsible for providing services as follows:

made by the department or agency responsible for providing services, although an emergency situation resulted in immediate removal of the child/juvenile from the home as follows:

not required under §48.355(2d) or §938.355(2d), Wis. Stats.,

- G. The proposed placement is certified as a Qualified Residential Treatment Program. The standardized assessment and recommendation by a qualified individual
- are attached
 - will be submitted by: _____ . *[No later than 30 days from date of filing of this request]*
- H. I request the court schedule a Change in Placement Hearing.

4. **Revise the Dispositional Order.**

- A. The proposed revisions are: **See attached**
- _____
- _____
- B. The following new information is available that affects the Dispositional Order: **See attached**
- _____
- _____
- C. I request the court
- revise the Dispositional Order based upon the written waivers of objection signed by all parties entitled to receive notice.
 - schedule a Revision Hearing.

5. **A party's address has changed.** A Notice of Change of Address (JD-1830)

- was previously filed with the court.
- is attached.

DISTRIBUTION:

1. Court
2. Child/Juvenile
3. Child/Juvenile's Guardian ad Litem/Adversary Counsel
4. Parents
5. Parents' Attorney(s)
6. Child's Guardian/Legal Custodian
7. Relative Caregiver/Foster Parent
8. District Attorney/Corporation Counsel
9. Caseworker
10. Court Appointed Special Advocate (CASA)

	Signature
	Name Printed or Typed
	Address
Email Address	Telephone Number
Date	State Bar No. (if any)