JUVENILE COVER SHEET

-or	Office	Use	Only

The juvenile cover sheet neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Clerk of the District Court for the purposes of initiating the juvenile docket sheet. This information will not be available to the public and this document will be stored in a separate location from the case file and then destroyed within a reasonable time. A new case will not be accepted without a cover sheet attached. (THIS FORM MUST BE TYPED OR PRINTED LEGIBLY). This form can be found at www.kscourts.org.

JUVENILE			
NATURE OF SUIT (Mark only one.)			
☐ JUVENILE OFFENDER			
CHILD IN NEED OF CARE			
AbuseTermination of Parental Rights	NeglectOther Deper	ndency/Child Victim	Dependent (no fault)Status Offense/Petition
CHILD'S INFORMATION (ATTACH ADDITIONAL SHEET, IF NECES)	SARY)	OTHER PARTY'S INFO	DRMATION L SHEET, IF NECESSARY)
NAME:		NAME:	
ADDRESS:			
DL OR STATE ID NO: State and Num	ber	DL OR STATE ID NO:	State and Number
SSN:DOB:		SSN:	DOB:
RACE: D WHITE D BLACK DASIAN D PACIF		RELATIONSHIP TO C	
☐ AMERICAN INDIAN/ALASKAN ☐ UNKN		☐ CUSTODIAN ☐ FOSTER PARENT(S) ☐ GRANDPARENT(S)	
ETHNICITY: THISPANIC TO NON-HISPANIC TO	UNKNOWN	☐ GUARDIAN ☐ PARENT	
SEX:			
ALIAS NAMES USED:		PHONE:	SEX:
		CELL PHONE:	
VDD TD ANG A CTION NUMBER.		E-MAIL ADDRESS:	
KDR TRANSACTION NUMBER:		ALIAS NAMES USED:	
ATTORNEYS (FIRM NAME, ADDRESS, TELEPHONE NUMBER AND SUPREME COU	IRT ID NUMBER)		
		KDR TRANSACTION N	NIIMRER:
		ATTORNEYS (IF KNO	,
		(FINIM NAME, ADDRESS, TELEPHON	IE NUMBER AND SUPREME COURT ID NUMBER)

The requirement that Social Security numbers be included on juvenile cases is not mandatory. The number is used for purposes of identification and may be disclosed as permitted by law. This form is not considered to be a public record.

ADDITIONAL JUVENILE PARTY INFORMATION

OTHER PARTY'S INFORMATION (ATTACH ADDITIONAL SHEET, IF NECESSARY)		OTHER PARTY'S INFORMATION (ATTACH ADDITIONAL SHEET, IF NECESSARY)			
NAME:		NAME:ADDRESS:			
					DL OR STATE ID N
SSN:	DOB:	SSN:	DOB:		
RELATIONSHIP TO CHILD:		RELATIONSHIP TO	RELATIONSHIP TO CHILD:		
☐ CUSTODIAN ☐ FOS ☐ GUARDIAN ☐ PAR	STER PARENT(S)	☐ CUSTODIAN ☐ FOSTER PARENT(S) ☐ GRANDPARENT(S) ☐ GUARDIAN ☐ PARENT ☐ OTHER			
PHONE:	SEX:	PHONE:	SEX:		
CELL PHONE:		CELL PHONE:			
E-MAIL ADDRESS:		E-MAIL ADDRESS:			
	ED:	ALIAS NAMES USEI	D:		
	ON NUMBER:	KDR TRANSACTION	I NUMBER:		
ATTORNEYS (IF KNOWN) (FIRM NAME, ADDRESS, TELEPHONE NUMBER AND SUPREME COURT ID NUMBER)		ATTORNEYS (IF KNC (FIRM NAME, ADDRESS, TELEPH	OWN) ONE NUMBER AND SUPREME COURT ID NUMBER)		

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					DL OR STATE ID N
SSN:	DOB:	SSN:	DOB:		
RELATIONSHIP TO CHILD:		RELATIONSHIP TO	RELATIONSHIP TO CHILD:		
☐ CUSTODIAN ☐ FOS ☐ GUARDIAN ☐ PAR	STER PARENT(S)	☐ CUSTODIAN ☐ FOSTER PARENT(S) ☐ GRANDPARENT(S)☐ GUARDIAN ☐ PARENT ☐ OTHER			
PHONE:	SEX:	PHONE:	SEX:		
CELL PHONE:		CELL PHONE:			
E-MAIL ADDRESS	E-MAIL ADDRESS:		E-MAIL ADDRESS:		
ALIAS NAMES USED:		ALIAS NAMES USED:			
KDR TRANSACTIO	ON NUMBER:	KDR TRANSACTION	I NUMBER:		
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PHONE:	SEX:	PHONE:	SEX:		
CELL PHONE:		CELL PHONE:			
E-MAIL ADDRESS	E-MAIL ADDRESS:		E-MAIL ADDRESS:		
ALIAS NAMES USED:		ALIAS NAMES USED:			
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