



Use back of form or additional sheets if more space is required.

TO: COURT OF PROBATE,

DISTRICT NO.

IN THE MATTER OF [Name, present address, and zip code] Hereinafter referred to as the minor child.

MINOR CHILD'S DATE OF BIRTH

GUARDIAN(S) OF THE PERSON OF THE MINOR CHILD
[Name(s), address(es), zip code(s) and telephone number(s)]

PARENT(S) OF THE MINOR CHILD [Name(s), present
address(es), zip code(s), and telephone number(s)]

This guardian's report covers the reporting period from _____ to _____ and is being filed for the following reason: [C.G.S. §45a-625] Annual Report Court-ordered Report Other [Specify.]

Is the minor child in day care, pre-school, or school? If so, what grade?

Describe how the minor child is doing in school (behavior, grades, etc.) and anything that has changed significantly during the last year.

Have any major changes happened during the last year that affect this minor child? YES NO If YES, please describe.

Describe any problems with visitation with the mother, father, or other relatives.

Describe the minor child's relationship with any brothers or sisters who live apart and whether they visit each other.

Describe any special problems you have caring for this minor child.

Describe any special medical or psychological conditions the minor child has. Does he or she have medical insurance? YES NO

Describe any programs or services you are using to meet the minor child's special needs, if any. [For example, medication, counseling, special education, extended day care.] Do you need help obtaining these or other services?

Describe any assistance you are receiving from the Department of Children and Families or any other State or private agency.

List any other things that you believe the Court should consider.

.....
Guardian:

.....
Guardian:

Dated at: _____, Connecticut, on [Month, Day, Year]