AOC-DNA-1 Rev. 1-21

Doc. Code: PJ or

PJECA

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Commonwealth of Kentucky
Court of Justice www.kycc

www.kycourts.gov



Case No.		
Court	☐ District	☐ Family
Division _		
County		

KRS 610.010, 620.023, .027, .050 070, .080; FCRPP 19	060, PET	CY/NEGLECT OR ABUSE TITION STODY ORDER AFFIDAVIT	County
Tomporony Domoval Hoorin		USE ONLY	Time: Dem Dem
			Time: a.m. p.m.
Location:			
IN THE INTEREST OF:			, A CHILD
DOD	0	1 5	201
DOB	Sex	Race	SSN
Afficial			•
Affiant,			County, Kentucky, the above-named
			R Code - 002826) pursuant to KRS
 As required by KRS 620.03 Local law enforcement 	. ,	garding these facts to the Cabinet for Health 8	• •
☐ Kentucky State Police		☐ Commonwealth Atto	•
☐ County Attorney		☐ Did not report	•
If you did not report, ple	ease explain why:		· · · · · · · · · · · · · · · · · · ·
To your knowledge, are ther county or any other county/	•	·	proceedings related to the child in this
If Yes, please give the t	ype of case and county, if kno	own:	
Name of person believed re	esponsible for 🖵 dependency	r □ neglect or abuse:	

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4. a. If removal from the custodial parent is requested, has the non-custodial parent bee child? ☐ Yes ☐ No	n contacted for placement of the
If No, was the non-custodial parent considered for placement? ☐ Yes ☐ No	
b. Is there any existing Order which restricts placement with the non-custodial parent If Yes, list state, county, case number and date of order if known (or attach copy if	
c. Is there any other reason the non-custodial parent was not considered for placeme If Yes, please explain why the non-custodial parent was not contacted or consider	
5. Complete the following information:	
Juvenile's Address(es):	
Juvenile currently resides at	(county)
with Mother Father Other	
Juvenile ordinarily resides at (if different from above)address	(county)
with Mother Father Other	
Juvenile will reside at (if known)	
with Mother Father Other	
Juvenile attends school at	
Juvenile's Phone No.: ()	
Juvenile's Legal Mother:Address:	
Email Address (if known):	Custodian? 🗆 Vos. 🗇 No
Name of Other(s) Living in Mother's Home and relationship to the Child:	Custodian? Li Yes Li No
□ Stepparent:	
□ Sibling(s):	
□ Other:	

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Address:	
Phone No : () SSN:	DOB: Legal Custodian? □ Yes □ No
Name of Other(s) Living in Father's Hon	ne and relationship to the Child:
□ Stepparent:	
□ Other:	
☐ Name, address and relation of other person	n(s) exercising custodial control or supervision of the child PECCS
Email Address (if known):	
Phone No.: ()	DOB: Legal Custodian? □ Yes □ No
Name of Other(s) Living in the PECCS's Hor	
☐ Name, address and relation of nearest know	wn adult relative, if no parent or PECCS is located:
	ue based upon information and belief.
Affiant's Relationship to the Child:	PhoneNo.:()
Date:, 2	Affiant's Signature:
STATE OF	
COUNTY OF	
Subscribed and sworn to before me 🖵 in i	my presence via oral communication on this the day a.m. p.m.
f a Notary: My commission expires:	·
	Notani Dublia an Circuit Clark/D C
	Notary Public or Circuit Clerk/D.C.

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CHFS Use Only. Non-CHFS users must complete the AOC-DNA-2.1, Emergency Custody Order Affidavit EMERGENCY CUSTODY ORDER AFFIDAVIT* FOR CHFS
(*You may use this ECO Affidavit instead of the AOC-DNA-2.1 if an ECO is being sought at the same time as this Petition is filed. Use the AOC-DNA 2.1 ECO Affidavit if you need more room to write or if the petition will be filed at a later time.)
I,, swear or affirm under oath the above statements
located in the first paragraph of the Petition are true to the best of my knowledge with respect to the above-named child.
There is an immediate risk to the child and the additional following facts support that removal from the home is the least
restrictive placement at this time:

Date:, 2 Affiant's Signature:
Affiant's Relationship to the child:
Amarica relationship to the office.
STATE OF
COUNTY OF
Subscribed and sworn to before me □ in my presence □ via oral communication on this the day of
, 2, at 🗖 a.m. 🗖 p.m.
If a Notary: My commission expires:
Notary Public or Circuit Clerk/D.C.