

**GUARDIAN AD LITEM REQUEST
FOR IN-COURT JUDICIAL REVIEW**

JD-JM-194 New 4-12

**STATE OF CONNECTICUT
JUDICIAL BRANCH**

www.jud.ct.gov



Instruction to preparer:

Fill out this form and file it with the court.

Instruction to clerk:

Schedule the in-court judicial review and notify all appearing attorneys and self-represented parties in the case.

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at www.jud.ct.gov/ADA/.

Juvenile District at

Docket number

Name of child or children

Mother's name (Last, first)

Father's name (Last, first)

As court-appointed guardian ad litem for the minor child or children in this matter, I request an in-court judicial review be scheduled by the court with all parties and counsel present.

I represent to the court that:

- This is an urgent matter affecting the child or the children:
 - Regarding the safety of the child or the children.
 - Regarding compliance with existing court orders.
- This is not an urgent matter but requires the court's attention.
- This matter is on appeal. I am requesting the appointment of an attorney under Section 67-13 of the Connecticut Practice Book.

Signed (Guardian Ad Litem for the minor child or children)

Print name of person signing at left

Date signed

Certification

I certify that a copy of this document was mailed or delivered on (date) _____ to all attorneys and self-represented parties of record.

Name and address of each party and attorney that copy was mailed or delivered to*

*If necessary, attach additional sheet or sheets with name and address which the copy was mailed or delivered to.

Signed (Guardian Ad Litem)

Print or type name of person signing

Mailing address

Telephone number