

**IN THE COURT OF COMMON PLEAS OF ALLEGHENY COUNTY, PA
FAMILY DIVISION – JUVENILE SECTION**

**APPLICATION TO FILE PRIVATE DEPENDENCY PETITION
PRIVATE DEPENDENCY PETITION**

In the Interest of:

_____,
a minor

DOCKET No. _____
JID No. _____
KIDS ID No. _____

Child's Information

Name: _____ DOB: _____ Age: _____ Sex: _____

Address: (Street/City/Zip) _____

Phone Number(s): _____

Race: ___ Asian/Pacific Islander ___ Bi-Racial
 ___ Black ___ Native American – Tribal Affiliation _____
 ___ Caucasian ___ Unknown

Ethnicity: ___ Hispanic ___ Not Hispanic ___ Unknown

Child's Mother: _____ DOB: _____

Address: _____

Phone Number(s): _____

Child's Father: _____ DOB: _____

Address: _____

Phone Number(s): _____

Child's Legal Custodian or Guardian: _____ DOB: _____

Address: _____

Phone Number(s): _____ Relationship to Child: _____

Child Currently Resides With: ___ Mother ___ Father ___ Both Parents ___ Legal Custodian/ Guardian

Other (Name/Relationship/Address/Phone): _____

Applicant and Petitioner ___ **has** ___ **has not** informed the Allegheny County Office of Children, Youth and Families about the above allegation(s).

Applicant and Petitioner ___ **is** ___ **is not** aware of any additional current or prior Family Division or other custody/guardianship proceedings concerning the child.

Nature of other proceedings: _____

WHEREFORE, Applicant and Petitioner asks this Honorable Court to approve this Application to File Private Dependency Petition.

WHEREFORE, Applicant and Petitioner asks this Honorable Court to set a hearing time to inquire into the allegations stated in this Private Dependency Petition and to make whatever orders deemed appropriate.

VERIFICATION

Applicant and Petitioner verifies that the facts set forth above are true and correct to the Applicant and Petitioner’s personal knowledge, information, or belief, and that any false statements are subject to the penalties of the Crimes Code, 18 Pa.C.S. § 4904, relating to unsworn falsification to authorities.

DATE: _____

Applicant and Petitioner

For Official Use Only	
Hearing Date: _____	Time: _____
Judge: _____	Hearing Officer: _____
Location: ___ Family Law Center (440 Ross Street, Pittsburgh, PA 15219)	
___ North Regional Courtroom (1972 Clayton Avenue, Pittsburgh, PA 15214)	
___ South Regional Courtroom (1700 East Carson Street, Pittsburgh, PA 15203)	
___ Mon Valley Regional Courtroom (120 Fifth Avenue, McKeesport, PA 15132)	

Requests to change the date, time or place of a hearing are not usually granted. To make such a request, the requestor must file a written document called a **motion** with the Court. Information about how to file a motion can be found in the Children’s Court Manual (www.alleghenycourts.us/family/CourtManual/Children.aspx). If a motion to change the date, time or place of a hearing is granted, the requestor must give a copy of the Order that reschedules the hearing to all parties. Requestor must also complete a Certificate of Service for each party, which must be given to the Court at the time of the rescheduled hearing.