

REQUIRED

GUARDIAN AD LITEM REPORT

Neb. Ct. R. § 6-1468(E)(3)(c)

APPENDIX 12

IN THE COUNTY COURT OF _____ COUNTY, NEBRASKA

THE STATE OF NEBRASKA
IN THE INTEREST OF

Case Number: _____

GUARDIAN AD LITEM REPORT

A CHILD/CHILDREN
UNDER 18 YEARS OF AGE.

A. Information

The undersigned individual was appointed by the Court as the Guardian Ad Litem for the above-named child(ren).

Date of Report: _____

Date of Hearing: _____

Type of Hearing: _____

1. IDENTIFYING INFORMATION

Mother: _____

Father: _____

Legal Custodian: Child(ren): _____

Child's Name	Age (at time of report)	Placement

2. CONTACT WITH CHILD(REN) SINCE LAST HEARING:

Since the date of the last hearing, if any, I have had the following contact with the child(ren):

Date of Contact	Child Contacted	Type of Contact & by Whom (In-person, Phone, Other)

If no contact has been made, please explain why:

Expressed preferences of children, if any:

3. PERSONS AND OTHER RESOURCES CONTACTED SINCE LAST HEARING:

Since the date of the last hearing, if any, I have contacted the following persons and/or other resources, including caseworkers, physicians, psychologists, parents, foster parents, and teachers, in an effort to learn information about the child(ren)'s and family's circumstances and progress:

Date of Contact	Person or Resource Contacted	Title or Agency Name

4. DOCUMENTS REVIEWED SINCE LAST HEARING:

Since the date of the last hearing, if any, I have reviewed and relied upon the following documents:

Date of Document	Document Type/Title

B. Guardian Ad Litem Report to the Court

1. Guardian Ad Litem Narrative:

Based upon information available, the following is a comprehensive outline of the relevant information and concerns about the child(ren) or family situation:

2. RECOMMENDATIONS:

Based upon my contact with the child(ren), contact with others, and review of documents since the date of the last hearing, if any, and based upon all the files, records, and proceedings related to this matter,

As Guardian Ad Litem, I find that reasonable efforts have been made by the Nebraska Department of Health and Human Services for the child(ren) to return to or remain in the parental home:

Yes No

As Guardian Ad Litem, I find that the child(ren) would be at risk of harm if the child(ren) returned to or remained in the parental home at this time, and recommend removal or continued removal by the Court from the parental home: Yes No

As Guardian Ad Litem, I have identified the following as possible barriers to permanency:

As Guardian Ad Litem, I have identified the following active efforts (if applicable):

As Guardian Ad Litem,

_____ I am in agreement with the recommendations made by the Nebraska Department of Health and Human Services.

_____ I recommend the following additional requirements be court ordered:

_____ I disagree with the recommendations of the Nebraska Department of Health and Human Services and instead request that the Court order:

Signature

Please Print or Type Name

Bar Number and Firm Name (attorneys only)

Phone

Date: _____

Street Address/P.O. Box

City/State/ZIP Code

E-mail Address