**Superior Court of Washington, County of**

**Juvenile Court**

|  |  |
| --- | --- |
| In Re:D.O.B.:  | **No**:**Order on Review Hearing re Petition for Reinstatement of Terminated Parental Rights**[ ]  **Order on Review Hearing (ORRVH)**[ ] **Dismiss (ORDSM)****Clerk’s Action Required**:3.1, 3.2, 3.3 |

**I. Basis**

**1.1** The court held a threshold hearing in this matter on *(date)*  .

**1.2** The following persons were present:

[ ] Child [ ] Child's Lawyer

[ ] Parent 1 [ ] Parent 1's Lawyer

[ ] Parent 2 [ ] Parent 2's Lawyer

[ ] Guardian or Legal Custodian [ ] Guardian's or Legal Custodian's Lawyer

[ ] Child's GAL [ ] GAL's Lawyer

[ ] DCYF [ ] DCYF’s Lawyer

[ ] Tribal Representative [ ] Tribal Lawyer

[ ] Interpreter for Parent [ ] 1 [ ] 2 [ ] Other

[ ] Other

**II. Findings**

**2.1** The court granted, conditionally, a petition for reinstatement of terminated parental rights, and temporarily reinstated the parent’s rights. On *(date)* , the court signed an order placing the child with their parents for a six month period.

**2.2** DCYF [ ] did [ ] did not develop a permanency plan for reunification of the child with their parent(s).

**2.3** DCYF [ ] did [ ] did not provide court-ordered transitional services to the family.

**2.4** The child’s placement with their parents for the conditional six month period [ ] was
[ ] was not successful.

**2.5**  Other

**III. Order**

**3.1** [ ] The court grants the petition by separate order.

**3.2** [ ] The petition for reinstatement of terminated parental rights is dismissed.

**3.3** [ ] Other:

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Judge/Commissioner**

Presented by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name WSBA No.

Copy Received; Approved for Entry; Notice of Presentation Waived:

Signature of **Child** Signature of Child’s Lawyer

 Print Name WSBA No.

Signature of Child’s **Guardian ad Litem** Signature of Lawyer for the Guardian ad Litem

Print Name Print Name WSBA No.

Signature of **Parent 1** Signature of Parent 1’s Lawyer

 Print Name WSBA No.

Signature of **Parent 2** Signature of Parent 2’s Lawyer

 Print Name WSBA No.

Signature of **DCYF Representative** Signature of DCYF Representative’s Lawyer

Print Name Print Name WSBA No.

Signature of **Tribal Representative** Signature

Print Name Print Name WSBA No.

 Lawyer for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_