**Superior Court of Washington, County of**

**Juvenile Court**

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

**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 has jurisdiction over the parties and the subject matter.

**2.2** Proper notice of this hearing [ ] was [ ] was not given.

**2.3** The court has received and considered evidence relating to the apparent fitness of *(names)*  and of their interest in reinstatement of their parental rights.

**2.4** The court [ ] does [ ] does not find, by a preponderance of the evidence, that the best interests of the child may be served by reinstatement of parental rights.

**2.5** Other

**III. Order**

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

**3.2** [ ] The court has scheduled a hearing on the merits

for: at: [ ] a.m. [ ] p.m.

*date time*

at: in

*court’s address room or department*

*docket / calendar or judge / commissioner’s name*

**3.3** [ ] DCYF shall provide the court with information relating to efforts to achieve the permanency plan, including efforts to achieve adoption or permanent guardianship,
 days prior to the hearing set in paragraph 3.2.

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

 **Judge/Commissioner**

Presented by:

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

Signature

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

Print Name/Title 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 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_