

Superior Court of Washington, County of \_\_\_\_\_

In the Guardianship of:

\_\_\_\_\_  
Respondent/s (*minors/children*)

No. \_\_\_\_\_

Order Directing DCYF to Release CPS Information (ORDINFO)  
Clerk's action required: **5**

**Order Directing DCYF to Release CPS Information (Guardianship)**

1. Petitioner/s filed a *Minor Guardianship Petition*. The Court needs information from the Department of Children, Youth, and Families (DCYF).
2. The Court orders DCYF to provide information as allowed by RCW 13.50.100 about investigations in which:
  - the children involved in this case were alleged victims of abandonment, abuse, or neglect; or
  - the proposed guardian/s, or any person age 16 or older who lives with the proposed guardian/s, is the subject of a founded or currently pending CPS investigation by the Department of Social and Health Services or DCYF started after October 1, 1998.

DCYF must provide this information under a *Sealed CPS Information* cover sheet (form GDN M 406) to the court at this address:

Superior Court Clerk, \_\_\_\_\_ County

\_\_\_\_\_  
*Address City State Zip*

DCYF must provide the information by (*date*): \_\_\_\_\_ or within a reasonable amount of time if no date is specified.

3. List the children:

Child's name	Age	Child's name	Age
1.		2.	
3.		4.	

4. List the proposed guardian/s and anyone 16 or older living in the home:

**Proposed guardian**

Full Name: \_\_\_\_\_

Also Known As: \_\_\_\_\_

Birthdate: \_\_\_\_\_

**Other Individual in the Home**

Full Name: \_\_\_\_\_

Also Known As: \_\_\_\_\_

Birthdate: \_\_\_\_\_

**Other Individual in the Home**

Full Name: \_\_\_\_\_

Also Known As: \_\_\_\_\_

Birthdate: \_\_\_\_\_

**Other proposed guardian**

Full Name: \_\_\_\_\_

Also Known As: \_\_\_\_\_

Birthdate: \_\_\_\_\_

**Other Individual in the Home**

Full Name: \_\_\_\_\_

Also Known As: \_\_\_\_\_

Birthdate: \_\_\_\_\_

**Other Individual in the Home**

Full Name: \_\_\_\_\_

Also Known As: \_\_\_\_\_

Birthdate: \_\_\_\_\_

5. **Clerk's Action:** The clerk shall forward a copy of this order to DCYF. Information received from DCYF in response to this order must be filed under seal. Only the parties in this case, their lawyers, the Guardian ad Litem (if any), and the person whose information was released may have access to this information.

Other: \_\_\_\_\_  
\_\_\_\_\_

6. The information DCYF provides in response to this order is confidential. Anyone who sees the information must keep it confidential and protect against unauthorized disclosure.

**Ordered.**

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Judge or Commissioner*

**Petitioner and Respondent/s or their lawyers fill out below.**

Presented by:

\_\_\_\_\_  
*Signature of Party/Lawyer*

\_\_\_\_\_  
*Printed Name* *WSBA No.*

Copy received and approved by:

\_\_\_\_\_  
*Signature of Party/Lawyer*

\_\_\_\_\_  
*Printed Name*

\_\_\_\_\_  
*Signature of GAL or CV*

\_\_\_\_\_  
*Printed Name*