

## CHILD'S REPORT TO THE COURT

CHILD'S NAME \_\_\_\_\_ CASE #JV \_\_\_\_\_

I wrote this report: \_\_\_ by myself; \_\_\_ with the help of \_\_\_\_\_

When do you feel safe? Or not safe?

Do you need to go to the doctor, eye doctor, or dentist?

My favorite activities are:

Things I would like to change about my visits are:

Things I like about my parents are:

Things that worry me are:

I attend \_\_\_\_\_ School. I am in the \_\_\_\_\_ grade. Things I like/dislike about school are:

The important people in my life are:

I would like the judge to know:

CHILD'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_