

FORM SUMMARY

Name of Form: Adjudication and Prohibited Possession of Firearms and Caregiver License Restriction Report

Form Number: GF-220
(DJ-LE-FH9)

Statutory Reference: §§48.685, 51.20(13)(cv)4, 51.45(13)(i)4, 54.10(3)(f)4, 55.12(10)(d) and 938.396(2g)(n), Wisconsin Statutes

Benchbook Reference:

Purpose of Form: A form to notify the Crime Information Bureau (CIB) that a juvenile, individual found incompetent, under a guardianship, or under protective services or protective placement, has been prohibited from possessing a firearm. Also notifies CIB that a juvenile is prohibited from caregiver licensure/employment.

Who Completes It: Clerk.

Distribution of Form: Original to Crime Information Bureau, Attn: Handgun Hotline, P.O. Box 2718, Madison, WI 53701-2718, or faxed to CIB at (608) 264-6200, or emailed to: wihotline@doj.state.wi.us ; Copy to court file.

Accompanying Forms: None

New Form/Modification: Modified; last update 08/10.

Modifications: Changed "Care License Restriction" to "Caregiver" License Restriction. Under juvenile adjudication, changed references "daycare" to "caregiver".

Comments: This form reflects new requirements enacted as part of 2009 Wis. Act. 258, effective date July 1, 2010.

About this Form: This form is the product of the Wisconsin Records Management Committee, a committee of the Director of State Court's Office and a mandate of the Wisconsin Judicial Conference.

If you have additional information that does not change the meaning of the form, attach it on a separate page. The form itself shall not be altered.