

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

IN THE INTEREST OF

Name _____

Date of Birth _____

**Notice of
Permanency Hearing**

Case No. _____

This case is scheduled for a permanency hearing as indicated below:

NOTICE OF HEARING		
Date	Time	Location (Include Room No.)
Circuit Court Judge/Circuit Court Commissioner		

You have a right to be heard by participating at the hearing or by submitting written comments not less than 10 working days before the hearing.

The issues to be determined at the hearing include:

- Continuing necessity for and the safety and appropriateness of the placement.
- Compliance with the permanency plan by the parties and service providers.
- Efforts to involve the appropriate service providers to meet the special needs of the child/juvenile and parents.
- Progress toward eliminating causes for the child's/juvenile's out-of-home placement and returning the child/juvenile home or obtaining a permanent placement.
- The date by which the permanency goal is likely to be achieved.
- If applicable, the appropriateness of the permanency plan and the circumstances which prevent the child/juvenile from achieving a permanent placement.
- Whether reasonable efforts were made by the agency to achieve the permanency goal of the permanency plan.

Name and contact information of assigned caseworker: _____

See attached

If you require reasonable accommodations due to a disability to participate in the court process, please call _____ prior to the scheduled court date. Please note that the court does not provide transportation.

_____ County Circuit Court

Date _____

DISTRIBUTION	Personal Service	Mail Notice	TELEPHONE NOTICE			
			NAME	DATE	TIME	BY
1. Court						
2. Child/Juvenile						
3. Parent 1						
4. Parent 2						
5. Prosecutor						
6. Child's/Juvenile's Attorney/GAL						
7. Dept. Soc. Services						
8. Foster Parents/Treatment Foster Parents/ Physical Custodian						
9. Guardian						
10. School						
11. Tribe (if any)						
12. Other:						