

IN THE INTEREST OF

**Temporary Physical Custody Request
(CHIPS Expectant Mother §278-44)**

Name _____

Date of Birth _____

| | | | | | | | | |
|--|--|---|-----------------------|------------------------|-------------------------|---|------------------------------------|--------------------------------|
| Referring Agency Case Number | | | | Department Case Number | | | | |
| Expectant Mother's Name (Last, First, Middle) | | | EM's Date of Birth | EM's Place of Birth | EM's Tribal Affiliation | EM's Home Telephone Number | Unborn Child's approx development: | |
| Expectant Mother's Address | | | | | | | | |
| <input type="checkbox"/> address is on the Menominee Indian Reservation with jurisdiction under § 278-3. | | Why was expectant mother taken into custody? (§§278-44 Menominee Tribal Code) | | | | | | |
| Expectant Mother's County of Residence | | <input type="checkbox"/> Warrant/capias <input type="checkbox"/> Order by judge <input type="checkbox"/> Substantial risk to physical health of unborn child due to alcohol or controlled substance/analogs <input type="checkbox"/> Expectant mother violated conditions of an order or temporary physical custody order | | | | | | |
| Requesting Agency Complete | Mother's Name and Address | | | Mother's Date of Birth | Mother's Place of Birth | Mother's Tribal Affiliation | Mother's Home Telephone Number | Mother's Work Telephone Number |
| | Father's Name and Address <input type="checkbox"/> See attached for additional parties. | | | Father's Date of Birth | Father's Place of Birth | Father's Tribal Affiliation | Father's Home Telephone Number | Father's Work Telephone Number |
| | Legal Status: <input type="checkbox"/> Birth <input type="checkbox"/> Adjudicated/Adoptive <input type="checkbox"/> Presumed <input type="checkbox"/> Alleged <input type="checkbox"/> Unknown | | | | | | | |
| | Legal Guardian/Indian Custodian's Name and Address | | | Date of Birth | Place of Birth | Tribal Affiliation | Home Telephone Number | Work Telephone Number |
| | Other known information in regard to tribal affiliation or enrollment, including all potential tribes that the child may be a member and aliases or enrollment numbers of parents, grandparents, or other direct lineal ancestors: | | | | | | | |
| Date and Time Taken Into Custody | | | Taken Into Custody By | | | Agency | | |
| The adult relative or friends notified by referring party? <input type="checkbox"/> Yes (Date and Time) <input type="checkbox"/> No Additional information on notice: | | | | | | | | |
| Why was expectant mother not released? | | | | | | | | |
| Supporting facts of reason why expectant mother was taken into physical custody (§278-44 Menominee Tribal Code): <input type="checkbox"/> See attachment | | | | | | | | |
| Copy provided to expectant mother: <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | |
| Dept Worker Complete | Was Expectant Mother notified of right to counsel at own expense? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | |
| | Were notice of custody decision and hearing rights provided? (§278-44 Menominee Tribal Code) | | | | | If no, what ongoing efforts have been made to notify? | | |
| | Adult 1: <input type="checkbox"/> Yes, Date _____ Time _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> No | | | | | | | |
| | Adult 2: <input type="checkbox"/> Yes, Date _____ Time _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> No | | | | | | | |
| Adult 3: <input type="checkbox"/> Yes, Date _____ Time _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> No | | | | | | | | |
| Tribe: <input type="checkbox"/> Yes, Date _____ Time _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> No | | | | | | | | |

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|----------------------------------|---|----------------------------------|--------------------------|
| Department Worker Complete | Jurisdictional Basis: <input type="checkbox"/> 1. CHIPS: §278-44. | | |
| | Continued Custody Criteria: (§§ 278-44 D and E) <input type="checkbox"/> 1. Expectant mother lack of self-control in use of <input type="checkbox"/> alcohol beverages <input type="checkbox"/> controlled substances/controlled substances analogs creates a substantial risk that the physical health of the unborn child, and of the child when born, will be affected or endangered unless the expectant mother is taken into custody and the expectant mother is refusing or has refused to accept any alcohol or other drug abuse services offered or is not making or has not made a good faith effort to participate in any alcohol or other drug abuse services offered. <input type="checkbox"/> 2. There is substantial risk that the physical health of the unborn child, and then child when born, will be seriously affected or endangered due to expectant mother's lack of self-control in use of <input type="checkbox"/> alcohol beverages <input type="checkbox"/> controlled substances/controlled substances analogs unless expectant mother taken into custody. | | |
| | Placement Decision: <input type="checkbox"/> 1. Expectant mother released to <input type="checkbox"/> adult relative or friend or <input type="checkbox"/> released under own supervision after counseling or behavior warning. <input type="checkbox"/> 2. Custody: (§§278-23, and 34, or 278-51, 52, and 278-193 Menominee Tribal Code.) <input type="checkbox"/> A. At licensed community-based residential facility <input type="checkbox"/> B. A medical clinic, hospital or appropriate medical facility. <input type="checkbox"/> C. At licensed treatment facility approved as the expectant mother is believed to have a mental illness or developmental disability or to be drug dependent and exhibits conduct that constitutes a substantial probability of physical harm to the self or unborn child or to others, or a very substantial probability of physical impairment or injury exists due to the impaired judgment of the expectant mother. <input type="checkbox"/> D. At approved treatment facility for emergency treatment as the expectant mother is believed to be an intoxicated person who has threatened, attempted or inflicted physical harm on herself or on another and is likely to inflict such physical harm unless committed, or is incapacitated by alcohol. | | |
| | Release of Expectant Mother from custody is contrary to the welfare of the expectant mother and unborn child, due to: <input type="checkbox"/> See attachment | | |
| | Efforts made to prevent custody and all safe return to the home include: <input type="checkbox"/> See attachment | | |
| Name of Placement | Address | Telephone Number | |
| Special precautions/information: | | | |
| Signature of Intake Worker | Date and Time Custody Authorized | Date and Time of Custody Hearing | Date and Time of Release |