

ORDER TO PROVIDE EDUCATIONAL RECORDS AND RECEIPTJD-JM-178 Rev. 1-22
C.G.S. §§ 46b-120, 46b-121; P.A. 21-15

For information on ADA accommodations, contact a court clerk or go to: www.jud.ct.gov/ADA.

STATE OF CONNECTICUT
SUPERIOR COURT
JUVENILE MATTERS
www.jud.ct.gov



Address of Court		Telephone number	Docket number	
Name of child		Grade	Sex	Date of birth
Address of child			Indian tribe/reservation if any	
Name of parent	Address of parent			
Name of parent	Address of parent			
Name of guardian, if any	Address of guardian			
Name of school	Address of school			
Name and title of contact person at school		Telephone number	Fax number	

Case type

 Child Protection Delinquency Emancipation Other _____

The child named above currently has a case pending before the Superior Court for Juvenile Matters.

For purposes of determining (*Select all that apply*): the need for services placement of the child final disposition of the case**Order**

The following records are ordered to be provided to the Court location listed above by _____:

<input type="checkbox"/> school transcript	<input type="checkbox"/> academic performance	(date)
<input type="checkbox"/> types of school programs	<input type="checkbox"/> school behavior	
<input type="checkbox"/> enrollment status	<input type="checkbox"/> expulsion and suspension	
<input type="checkbox"/> attendance reports	<input type="checkbox"/> meetings with parents	
<input type="checkbox"/> special education	<input type="checkbox"/> other	_____

If records are incomplete or do not exist, please attach an explanation for the Court.

Name of Judge	Judge's signature	Date
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Records produced in response to the above order shall be:

- used only for dispositional purposes **and**
- maintained under seal by the Court **and**
- released only after a hearing **or** with the consent of the child

Receipt/Response to OrderPlease acknowledge receipt of the court order for educational records by signing below and returning the records to the requesting Superior Court for Juvenile Matters. (*Select all that apply*):

<input type="checkbox"/> school transcript	<input type="checkbox"/> academic performance
<input type="checkbox"/> types of school programs	<input type="checkbox"/> school behavior
<input type="checkbox"/> enrollment status	<input type="checkbox"/> currently expelled
<input type="checkbox"/> attendance reports	<input type="checkbox"/> meetings with parents
<input type="checkbox"/> special education	<input type="checkbox"/> other
<input type="checkbox"/> explanation for any incomplete or non-existent records requested	

I certify that the items selected above are complete and accurate copies.

Signed	Name of person signing at left	
Title	Date	