STATE OF N	NORTH C	AROLINA		F	ile No.	
County				In The General Court Of Justice District Court Division		
	IN THE MA	TTER OF				
Name And Address Of Juv	enile					
				J	UVENILE PETIT	ION
				(ABUS	E/NEGLECT/DEPE	NDENCY)
				•		•
luvenile's Date Of Birth	Age	Race	Sex			G.S. 7B-101, -400, -402
Name Of Petitioner		•	·	Condition Alleged Abused	Neglected	Dependent
I have sufficient kno allege that:	wledge or infor	mation to believe	e that a case has	arisen that invokes the	e juvenile jurisdiction of	the court, and therefore
-			at the address sho	own above, was found	I in the district as allege	ed herein, or venue
2. The information re hereto and incorp			out in the Affidav	it As To Status Of Mi	inor Child (AOC-CV-6	09), which is attached
3. The names, addre	esses, and tele	phone numbers	of the juvenile's p	arents, guardian, cust	odian, or caretaker are	as follows:
	Name		Relationship/Ti	tle	Address	Telephone No.
•	abused juveni	le, neglected juv	enile, or depende	nt juvenile, as alleged	more specifically below	N: (Check only the blocks
that apply.) ☐ △ The invent	ila is an ARIIS	ED JUVENILE, i	in that:			
1. the j	uvenile's parer		todian, or caretake	er has inflicted or allow	ved to be inflicted on th	e juvenile a serious
2. the j	uvenile's parer	nt, guardian, cust			ved to be created a sub	stantial risk of serious
3. the j	uvenile's parer	nt, guardian, cust		er has used or allowed	I to be used upon the ju	uvenile cruel or grossly
4. the j	. . uvenile's parer	nt, guardian, cust	todian, or caretake			he commission of a sex
5. the j		-				us emotional damage to
6. the j	uvenile's parer	nt, guardian, cust nmitted by the ju		er has encouraged, dir	rected, or approved of o	delinquent acts involving
			verlie. nan trafficking und	er G.S. 14-43.15.		
•		(date or time perio	_	2. 3.3. 11 10.10.	· /State facts	supporting allegations that
-	•			ional pages if necessary.		supporting anagations that

	☐ 1. the☐ 2. the☐ 3. the☐ med 3. the☐ rem☐ 5. the☐ injuit☐ 6. the☐ of c☐ 7. the☐ 8. the☐ 9. the☐ specifical	juvenile's parent, guardian, custodian, or caret juvenile's parent, guardian, custodian, or caret dical care. juvenile's parent, guardian, custodian, or caret edial care. juvenile's parent, guardian, custodian, or caret rious to the juvenile's welfare. juvenile's parent, guardian, custodian, or caret ustody of the juvenile under G.S. 14-321.2. juvenile's parent, guardian, custodian, or caret juvenile's parent, guardian, custodian, or caret juvenile is a minor victim of human trafficking u	taker has not provided or arranged for the provision of necessary taker has not provided or arranged for the provision of necessary taker creates or allows to be created a living environment that is taker has participated or attempted to participate in the unlawful transfer taker has placed the juvenile for care or adoption in violation of law. under G.S. 14-43.15. efused to follow the recommendations of the Juvenile and Family Team e General Statutes. : (State facts supporting allegations that
	1. the juve 2. the app Specifical the juvenile	enile's care or supervision. juvenile's parent, guardian, or custodian is una ropriate alternative child care arrangement. ly, on or about (date or time period) e is a neglected juvenile as indicated above. Attach a	additional pages if necessary.)
		to hear the case to determine whether the alle vision of the State.	gations are true and whether the juvenile is in need of the care,
		VERI	FICATION
		rn, I say that I have read this Petition and that nation and belief, and as to those, I believe it to	the same is true to my own knowledge, except as to those matters be true.
SWORN	I/AFFIRIV	IED AND SUBSCRIBED TO BEFORE MI	E Name And Address Of Petitioner
Date		Signature Of Person Authorized To Administer Oaths	
Deput	ty CSC	Clerk Of Superior Court District Court Judge	Signature Of Patitioner
Assistant CSC Magistrate			Signature Of Petitioner
			Telephone No.
SEAL County Where Notarized		ere Notarized	Director Authorized Representative Of Director County Department of Social Services
		SIGNATURE OF A	TTORNEY (if applicable)
Date	Sig	nature Of Attorney	Name And Address Of Attorney

WITNESS(ES)							
Name	Address	Telephone No.					