| STATE OF NORTH CA | AROLINA | File No. | | | |
|--|---|--|--------------------------|---------------------------------------|--|
| | In The General Court Of Justice District Court Division | | | | |
| IN THE MAT | NOTICE OF HEARING IN JUVENILE PROCEEDING (ABUSE/NEGLECT/DEPENDENCY) G.S. Chapter 7B | | | | |
| To The Persons Named Below: Juvenile, if age 12 or older | | | | | |
| Name And Address | | Name And Address | | | |
| | | | | | |
| ☐ Parent ☐ Guardian ☐ C Name And Address | Custodian 🗌 Caretaker | Parent Guardian | n 🗌 Custodiai | n 🗌 Caretaker | |
| ☐ GAL ☐ DSS ☐ Foster Parent(s | s) | ☐ GAL ☐ DSS ☐ Foste | er Parent(s) | her: | |
| 5. to conduct a permanency plan home for the juvenile within a home for the juvenile within a few forces. 6. to conduct a post-termination. 7. to review the agency's plan forces. 8. to determine the obligation of someone other than the pare. | tition(s) filed on (date)t to 7B-906.1. This matter was lated by law on or before (date)t anning hearing pursuant to G.S. areasonable period of time. In of parental rights review pursuant for placement pursuant to G.S. of one or both parents to pay a resent(s). (G.S. 7B-904) optive parents by the Department. | (G.S. 7B-90) ast reviewed on (date) 7B-906.1 to develop or revie ant to G.S. 7B-908. 7B-909. easonable sum for the suppo | ew a plan to achiev | hile in the custody of | |
| | Time Of Hearing AM PM | Location Of Hearing | | | |
| Date Notice Issued Signature | , | | Deputy CSC Assistant CSC | Clerk Of Superior Court DSS Attorney | |

| | CERTIFICATE | OF S | ERVICE | | | | | |
|---|-------------|---------|--------------------------|---------------------------------------|-------------------------------|--|--|--|
| I certify that this Notice Of Hearing and a copy of any motion or other paper attached hereto were served as follows: | | | | | | | | |
| PERSON 1 | | | | | | | | |
| Date Name Of Person Served | | | | | | | | |
| By depositing a copy enclosed in a post-paid, properly addressed envelope in a post office or official depository under the exclusive care and custody of the United States Postal Service, addressed as shown on reverse. | | | | | | | | |
| ☐ By delivering a copy to the person named above. | | | | | | | | |
| ☐ By delivering a copy to the attorney of record for the person named above. | | | | | | | | |
| Other: (specify) | | | | | | | | |
| Name (type or print) | Signature | | Deputy CSC | Assistant CSC | Clerk Of Superior Court | | | |
| | DEDE | | Moving Party | Atty. For Moving Party | Other | | | |
| PERSON 2 Date Name Of Person Served | | | | | | | | |
| | | | | | | | | |
| By depositing a copy enclosed in a post-paid, properly addressed envelope in a post office or official depository under the exclusive care and custody of the United States Postal Service, addressed as shown on reverse. By delivering a copy to the person named above. | | | | | | | | |
| By delivering a copy to the attorney of record for the person named above. | | | | | | | | |
| Other: (specify) | | | | | | | | |
| Name (type or print) | Signature | - | Deputy CSC Moving Party | Assistant CSC Atty. For Moving Party | Clerk Of Superior Court Other | | | |
| | PERS | ON 3 | | | | | | |
| Date Name Of Person Served | | | | | | | | |
| By depositing a copy enclosed in a post-paid, properly addressed envelope in a post office or official depository under the exclusive care and custody of the United States Postal Service, addressed as shown on reverse. By delivering a copy to the person named above. | | | | | | | | |
| _ | | d abov | ۵ | | | | | |
| ☐ By delivering a copy to the attorney of record for the person named above. | | | | | | | | |
| Other: (specify) Name (type or print) | Signature | | Deputy CSC | Assistant CSC | Clerk Of Superior Court | | | |
| | 3 | | Moving Party | Atty. For Moving Party | Other | | | |
| PERSON 4 | | | | | | | | |
| Date Name Of Person Served | | | | | | | | |
| By depositing a copy enclosed in a post-paid, properly addressed envelope in a post office or official depository under the exclusive care and custody of the United States Postal Service, addressed as shown on reverse. | | | | | | | | |
| By delivering a copy to the person | | 25 5110 | WIT OIT TO VOIGO | • | | | | |
| By delivering a copy to the person named above. By delivering a copy to the attorney of record for the person named above. | | | | | | | | |
| | | | | | | | | |
| Other: (specify) Name (type or print) | Signature | Ī | Deputy CSC | Assistant CSC | Clerk Of Superior Court | | | |
| | 3 | | Moving Party | Atty. For Moving Party | Other | | | |
| PERSON 5 | | | | | | | | |
| Date Name Of Person Served | | | | | | | | |
| By depositing a copy enclosed in a post-paid, properly addressed envelope in a post office or official depository under the exclusive care and custody of the United States Postal Service, addressed as shown on reverse. | | | | | | | | |
| ☐ By delivering a copy to the person named above. | | | | | | | | |
| By delivering a copy to the attorney of record for the person named above. | | | | | | | | |
| Other: (specify) | | | | | | | | |
| Name (type or print) | Signature | | Deputy CSC Moving Party | Assistant CSC Atty. For Moving Party | Clerk Of Superior Court | | | |