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| ONTARIO | | | | | | | | | | | | | | |
| [SEAL] |  |  | | | | | | |  | Court File Number | | | | |
|  | (Name of court) | | | | | | |  | | | | |
| **at** |  | | | | | | | Form 8B: Application  (Child Protection and  Status Review) | | | | |
|  | Court office address | | | | | | |
| Applicant(s) *(In most cases, the applicant will be a children’s aid society.)* | | | | | | | | | | | | | | |
| Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any). | | | | |  | Lawyer’s name & address — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any). | | | | | | | | |
|  | | | | |  | | | | | | | | |
| Respondent(s) *(In most cases, a respondent will be a “parent” within the meaning of section 74 of the* Child, Youth and Family Services Act, 2017*.)* | | | | | | | | | | | | | | |
| Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any). | | | | |  | Lawyer’s name & address — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any). | | | | | | | | |
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| Children’s Lawyer | | | | | | | | | | | | | | |
| Name & address of Children’s Lawyer’s agent for service (street & number, municipality, postal code, telephone & fax numbers and e‑mail address (if any)) and name of person represented. | | | | | | | | | | | | | | |
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| **TO THE RESPONDENT(S):** | | | | | | | | | | | | | | |
| **A COURT CASE HAS BEEN STARTED AGAINST YOU IN THIS COURT. THE DETAILS ARE SET OUT ON THE ATTACHED PAGES.** | | | | | | | | | | | | | | |
| **THE FIRST COURT DATE IS** *(date)* | | | |  | | | **AT** |  | | |  | a.m. |  | p.m. |
| or as soon as possible after that time, at: *(address)* | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| If you have also been served with a notice of motion, there may be an earlier court date and you or your lawyer should come to court for the motion. | | | | | | | | | | | | | | |
| **IF YOU WANT TO OPPOSE ANY CLAIM IN THIS CASE,** you or your lawyer must prepare an Answer and Plan of Care (Form 33B.1 – a blank copy should be attached), serve a copy on the children’s aid society and all other parties and file a copy in the court office with an Affidavit of Service (Form 6B). | | | | | | | | | | | | | | |
| **YOU HAVE ONLY 30 DAYS AFTER THIS APPLICATION IS SERVED ON YOU (60 DAYS IF THIS APPLICATION IS SERVED ON YOU OUTSIDE CANADA OR THE UNITED STATES) TO SERVE AND FILE AN ANSWER. IF YOU DO NOT, THE CASE WILL GO AHEAD WITHOUT YOU AND THE COURT MAY MAKE AN ORDER AND ENFORCE IT AGAINST YOU.** | | | | | | | | | | | | | | |
| Check this box if this paragraph applies | |  | The children’s aid society is also making a claim for child support. You **MUST** fill out a Financial Statement(Form 13 – a blank copy attached), serve a copy on the society and file a copy in the court office with an Affidavit of Serviceeven if you do not answer this case. | | | | | | | | | | | |

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| Form 8B: | Application (Child Protection and Status Review) | | (page 2) | | Court File Number |
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| **WARNING: This case is subject to case management, which means that the case runs on a timetable. That timetable says that the following steps have to be finished by the following number of days from the start of this case:** | | | | | |
| *Service and filing of answers and plans of care – 30 days* | | | | | |
| *Temporary care & custody hearing – 35 days* | | | | | |
| *Settlement conference – 80 days* | | | | | |
| *Hearing – 120 days* | | | | | |
| **You should consider getting legal advice about this case right away.** If you cannot afford a lawyer, you may be able to get help from your local legal aid office. *(See your telephone directory under LEGAL AID).* | | | | | |
|  | |  | |  | |
| Date of issue | |  | | Clerk of the court | |
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| Form 8B: | | | Application (Child Protection and Status Review) | | | | | | (page 3) | | Court File Number | | |
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| THE CHILD(REN): *(List all children involved in this case.)* | | | | | | | | | | | | | |
| **Child’s Full Legal Name** | | | | | **Birthdate** | **Age** | **Sex** | **Full Legal Name(s) of Parent(s)** | | | | **Is the Child First Nations, Inuk, or Métis?** | **Child’s Bands and First Nations, Inuit, or Métis Communities** |
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| CLAIM BY APPLICANT | | | | | | | | | | | | | |
| **NOTE:** If this case is an application for a status review, strike out paragraph 1 and go immediately to paragraph 2. | | | | | | | | | | | | | |
| **1.** | The applicant children’s aid society asks the court to make a finding under Part V of the *Child, Youth and Family Services Act, 2017* that the child(ren) named in this application is/are in need of protection because: | | | | | | | | | | | | |
|  | (Check the applicable box(es). In each checked paragraph, delete those portions of the text that are not relevant.) | | | | | | | | | | | | |
|  |  | the child(ren) has/have suffered physical harm, inflicted by the person having charge of the child(ren) or caused by that person’s | | | | | | | | | | | |
|  |  |  | | failure to care for, provide for, supervise or protect the child(ren) adequately [subclause 74(2)*(a)(i)*]. | | | | | | | | | |
|  |  |  | | pattern of neglect in caring for, providing for, supervising or protecting the child(ren) [subclause 74(2)*(a)(ii)*]. | | | | | | | | | |
|  |  | there is a risk that the child(ren) is/are likely to suffer physical harm inflicted by the person having charge of the child(ren) or caused by that person’s | | | | | | | | | | | |
|  |  |  | | failure to care for, provide for, supervise or protect the child(ren) adequately [subclause 74(2)*(b)(i)*]. | | | | | | | | | |
|  |  |  | | pattern of neglect in caring for, providing for, supervising or protecting the child(ren) [subclause 74(2)*(b)(ii)*]. | | | | | | | | | |
|  |  | the child(ren) has/have been sexually abused or sexually exploited, by the person having charge of the child(ren) or by another person where the person having charge knows or should know of the possibility of sexual abuse or sexual exploitation and fails to protect the child(ren) [clause 74(2)*(c)*]. | | | | | | | | | | | |
|  |  | there is a risk that the child(ren) is/are likely to be sexually abused or sexually exploited, by the person having charge of the child(ren) or by another person where the person having charge knows of should know of the possibility of sexual abuse or sexual exploitation and fails to protect the child(ren) [clause 74(2)*(d)*]. | | | | | | | | | | | |
|  |  | the child(ren) require(s) treatment to cure, prevent or alleviate physical harm or suffering and the child(ren)’s parent or the person having charge of the child(ren) does not provide the treatment or access to the treatment, or, where the child(ren) is/are incapable of consenting to the treatment under the *Health Care Consent Act, 1996* and the parent is a substitute decision-maker for the child(ren), the parent refuses or is unavailable or unable to consent to the treatment on the child(ren)’s behalf [clause 74(2)*(e)*]. | | | | | | | | | | | |
|  |  | the child(ren) has/have suffered emotional harm, demonstrated by serious anxiety, depression, withdrawal, self-destructive or aggressive behaviour, or delayed development and there are reasonable grounds to believe that the emotional harm suffered by the child(ren) results from the actions, failure to act or pattern of neglect on the part of the child(ren)’s parent or the person having charge of the child(ren) [clause 74(2)*(f)*]. | | | | | | | | | | | |
|  |  | the child(ren) has/have suffered emotional harm, demonstrated by serious anxiety, depression, withdrawal, self-destructive or aggressive behaviour, or delayed development and the child(ren)’s parent or the person having charge of the child(ren) does not provide treatment or access to treatment, or, where the child(ren) is/are incapable of consenting to treatment under the *Health Care Consent Act, 1996*, refuses or is unavailable or unable to consent to the treatment to remedy or alleviate the harm [clause 74(2)*(g)*]. | | | | | | | | | | | |
|  |  | there is a risk that the child(ren) is/are likely to suffer emotional harm, demonstrated by serious anxiety, depression, withdrawal, self-destructive or aggressive behaviour, or delayed development resulting from the actions, failure to act or pattern of neglect on the part of the child(ren)’s parent or the person having charge of the child(ren) [clause 74(2)*(h)*]. | | | | | | | | | | | |

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| Form 8B: | | | Application (Child Protection and Status Review) | | | | (page 4) | | Court File Number | |
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|  |  | there is a risk that the child(ren) is/are likely to suffer emotional harm, demonstrated by serious anxiety, depression, withdrawal, self-destructive or aggressive behaviour, or delayed development and that the child(ren)’s parent or the person having charge of the child(ren) does not provide treatment or access to treatment, or, where the child(ren) is/are incapable of consenting to treatment under the *Health Care Consent Act, 1996*, refuses or is unavailable or unable to consent to treatment to prevent the harm [clause 74(2)*(i)*]. | | | | | | | | |
|  |  | the child(ren) suffer(s) from a mental, emotional or developmental condition that, if not remedied, could seriously impair the child(ren)’s development and the child(ren)’s parent or the person having charge of the child(ren) does not provide treatment or access to treatment, or, where the child(ren) is/are incapable of consenting to treatment under the *Health Care Consent Act, 1996*, refuses or is unavailable or unable to consent to the treatment to remedy or alleviate the condition [clause 74(2)*(j)*]. | | | | | | | | |
|  |  | the child(ren)’s parent has died or is unavailable to exercise the rights of custody over the child(ren) and has not made adequate provision for the child(ren)’s care and custody, or the child(ren) is/are in a residential placement and the parent refuses or is unable or unwilling to resume the child(ren)’s care and custody [clause 74(2)*(k)*]. | | | | | | | | |
|  |  | the child(ren) is/are younger than twelve and has/have killed or seriously injured another person or caused serious damage to another person’s property, services or treatment are necessary to prevent a recurrence and the child(ren)’s parent or the person having charge of the child(ren) does not provide services or treatment or access to services or treatment, or, where the child(ren) is/are incapable of consenting to treatment under the *Health Care Consent Act, 1996*, refuses or is unavailable or unable to consent to treatment [clause 74(2)*(l)*]. | | | | | | | | |
|  |  | the child(ren) is/are less than twelve years old and has/have, on more than one occasion, injured another person or caused loss or damage to another person’s property, with the encouragement of the person having charge of the child(ren) or because of that person’s failure or inability to supervise the child(ren) adequately [clause 74(2)*(m)*]. | | | | | | | | |
|  |  | the child(ren)’s parent is unable to care for the child(ren) and the child(ren) is/are brought before the court with the parent’s consent and, where the child(ren) is/are twelve years of age or older, with the child(ren)’s consent, for the matter to be dealt with under Part V of the *Child, Youth and Family Services Act, 2017* [clause 74(2)*(n)*]. | | | | | | | | |
|  |  | the child(ren) is/are sixteen or seventeen years of age and a prescribed circumstance or condition exists [clause 74(2)*(o)*]. | | | | | | | | |
| **2.** | (name) | | |  | | | | asks for an order, | | |
|  |  | that the child(ren) be placed with *(name of parent or another person)* | | | | | | | |  |
|  |  | subject to the supervision of *(full legal name of supervising society)* | | | | | | | | |
|  |  |  | | | | | | | | |
|  |  | for a period of | | |  | months, on the terms and conditions set out in the Appendix on page 7 | | | | |
|  |  | of this Application form. | | | | | | | | |
|  |  | that the child(ren) be placed in the interim society care of *(full legal name of society)* | | | | | | | | |
|  |  |  | | | | | | | | |
|  |  | for a period of | | |  | months | | | | |
|  |  | that the child(ren) be placed in the interim society care of *(full legal name of society)* | | | | | | | | |
|  |  |  | | | | | | | | |
|  |  | for a period of | | |  | months and then returned to *(name of parent or another person)* | | | | |
|  |  |  | | | | | | | | |
|  |  | subject to the supervision of *(full legal name of supervising society)* | | | | | | | | |
|  |  |  | | | | | | | | |
|  |  | for a period of | | |  | months, on the terms and conditions set out in the Appendix on page 7 | | | | |
|  |  | of this Application form. | | | | | | | | |
|  |  | that the child(ren) be placed in the extended society care of *(full legal name of caretaker society)* | | | | | | | | |
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| Form 8B: | | | | Application (Child Protection and Status Review) | | | | (page 5) | Court File Number |
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|  |  | | relating to access under the *Child, Youth and Family Services Act, 2017*, the details of which are as follows: | | | | | | |
|  |  | |  | | | | | | |
|  |  | | that *(name of person)* | | | |  | | |
|  |  | | be restrained under s. 137 of the *Child, Youth and Family Services Act, 2017* from having any contact with *(name of child(ren) and/or any other caregiver)* | | | | | | |
|  |  | |  | | | | | | |
|  |  | | relating to payment of support while the child(ren) is/are in care or subject to an order of supervision, the details of which are as follows: | | | | | | |
|  |  | |  | | | | | | |
|  |  | | for court costs. | | | | | | |
|  |  | | other *(Specify.)* | |  | | | | |
|  |  | that the child(ren) be placed in the custody of *(name of custodian – cannot be a foster parent of the child)*: | | | | | | | |
|  |  |  | | | | | | | |
|  |  | (This order shall be deemed to be a parenting order under s. 28 of the Children's Law Reform Act.) | | | | | | | |
|  |  | relating to access, the details of which are as follows: | | | | | | | |
|  |  |  | | | | | | | |
|  |  | (This order shall be deemed to be a parenting or contact order, as the case may be, under s. 28 of the Children's Law Reform Act.) | | | | | | | |
|  |  | that *(name of person)* | | | |  | | | |
|  |  | be restrained under s. 102(3) of the *Child, Youth and Family Services Act, 2017* from having contact with *(name of child(ren) and/or any other caregiver)* | | | | | | | |
|  |  |  | | | | | | | |
|  |  | (This order shall be deemed to be an order under s. 35 of the Children's Law Reform Act.) | | | | | | | |

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| Form 8B: | | | Application (Child Protection and Status Review) | | | | | | (page 6) | | | | Court File Number | | |
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| **3.** | To the applicant’s best knowledge, the child(ren) | | | | | | | | | | | | | | |
|  |  | has/have never before been in the care of a society under an out-of-court agreement under s. 75 of *Child, Youth and Family Services Act*, *2017.* | | | | | | | | | | | | | |
|  |  | has/have been in the care of a society under an out-of-court agreement under s. 75 of the *Child, Youth and Family Services Act, 2017*. The details are as follows: *(Set out the number of times each child was in society care, when the care began and how long it lasted.)* | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | |
| **4.** | To the applicant’s best knowledge, the parties or the child(ren) | | | | | | | | | |  | have | |  | have not |
|  | been in a court case before relating to the supervision, interim or extended society care (guardianship), parenting (including decision-making responsibilities or parenting time) of or contact with the child(ren). *(Provide details of any existing parenting or contact order, including whether made by a superior court or under the* Divorce Act.*)* | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | |
| **5.** | The parties | | |  | have |  | | have not | | | | | | | |
|  | made a written agreement dealing with any matter involved in this case. *(If you checked the first box, give date of agreement and indicate which of its terms are in dispute. Attach an additional page if you need more space.)* | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | |
| **6.** | The following is a brief statement of the facts upon which the applicant is relying in this application. | | | | | | | | | | | | | | |
|  | (Set out the facts in numbered paragraphs. If you need more space, you may attach a page, but you must date and sign each additional page.) | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | |
| Put a line through any blank space left on this page. | | | | | | | | | | | | | | | |
|  | | | | | | |  | | |  | | | | | |
| Date of signature | | | | | | | Signature | | | | | |
|  | | | | | | |  | | |  | | | | | |
| If applicant is a children’s aid society, give office or position of person signing. | | | | | | |  | | | Print or type name. | | | | | |

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| Form 8B: | | Application (Child Protection and Status Review) | (page 7) | Court File Number | |
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| APPENDIX | | | | | |
| The terms and conditions proposed for the child(ren)’s supervision are as follows: *(Set out terms and conditions in numbered paragraphs. Omit this page if no supervision is sought.)* | | | | | |
|  |  | | | |  |