IN THE IOWA DISTRICT COURT FOR POLK COUNTY

JUVENILE DIVISION

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| **IN THE INTEREST OF**  **,**  Choose an item. | NO. JVJV\_\_\_\_\_\_AFFIDAVIT IN SUPPORT OF EX PARTE REMOVAL REQUEST, ADDRESSING PLACEMENT, AND ADDRESSING ICWA |

**STATE OF IOWA )**

**) ss**

**COUNTY OF POLK )**

The undersigned, being first duly sworn, depose and state as follows:

1. That I am employed by the Iowa Department of Health and Human Services (hereinafter the Department or “HHS”) as a Choose an item.
2. In the course of my duties and responsibilities, I came into contact with the above-named Choose an item. whose Choose an item.     **.**
3. The mother of the child(ren) in interest is
4. The biological father is
5. On April 5, 2022, the Department received a report of child abuse alleging      **.**
6. In response to the allegation of child abuse,      **.**
7. During the course of my work with this family, I have learned the following information, which leads me to believe that removal is necessary to avoid imminent danger to the child(ren)’s life or health:      .
8. That the Court’s aid is necessary to      .
9. That the Choose an item. parent Choose an item.
10. That the Department is asking for custody of the children with HHS for foster care placement.
11. In the course of the assessment, I asked both parents (if available), and any other persons with knowledge of this family, as to the availability of relative placement, fictive kin and other suitable persons and the following information was provided to me:
12. The names provided were deemed to be appropriate.

Criminal history:

Child Abuse history:

Inability to protect as evidenced by:

Other (please explain):

*Delete paragraph 16 if no names were provided.*

*Delete check boxes if name provided is appropriate.*

1. Placement with the other parent is not in the Choose an item. best interest because of      . Placement with a relative is not in the Choose an item. best interest because of      . Placement with fictive kin is not in the Choose an item. best interest because of      . Placement with another suitable person is not in the Choose an item. best interest because of      .
2. The Department proposes that the Choose an item. be placed in the home of      , whose address is      ; DOB:     ; relationship to child(ren):      . Phone number for placement:      .
3. There are Choose an item.
4. I have completed a child abuse registry check on all of the adults listed above and can verify that:Choose an item.
5. I have completed an ICIS criminal records check on all of the adults listed above and can verify that: Choose an item.
6. The following reasonable efforts have been made by the Department to eliminate the need for removal:
7. Continuation of the Choose an item. in the home is contrary to the welfare of the Choose an item. due to:      .
8. The need for removal due to an imminent risk to the Choose an item. life or health is greater than the potential harm that the removal may cause the Choose an item. including, but not limited to, any physical, emotional, social, or mental trauma. This is evidenced by      .
9. The Department is taking the following steps to reduce the trauma of the removal:      .
10. In the course of my assessment, I learned the following information regarding the states the Choose an item. lived in and the existence of any other court orders from Iowa or any other state concerning the Choose an item. for purposes of considering jurisdiction under the UCCJEA and Iowa Code 598B: Choose an item.
11. That in the course of my assessment, I asked both parents (if available), and any other persons with knowledge of this family, as to the existence of Native American heritage to determine the applicability of the Federal and State of Iowa Indian Child Welfare Acts and learned that Choose an item.

***I certify under penalty of perjury and pursuant to the laws of the State of Iowa that the preceding is true and correct.***

Affiant

February 7, 2023

Date