

**“GOOD CAUSE” DETERMINATION
BASED ON FACTORS OTHER THAN
DOMESTIC VIOLENCE
FOR CHILD SUPPORT OR PATERNITY**

CASE IDENTIFICATION				
CO.	RECORD NUMBER	CAT.	CTR.	DIST.

NAME OF CLAIMANT (CARETAKER)	
DATE FILED	CLAIM EXPIRES

I. CIRCUMSTANCES CLAIMED

A. THE CHILD WAS CONCEIVED AS A RESULT OF RAPE INCEST

B. LEGAL PROCEEDINGS FOR ADOPTION OF THE CHILD ARE PENDING

C. THE POSSIBILITY OF GIVING THE CHILD UP FOR ADOPTION IS CURRENTLY UNDER DISCUSSION (WITHIN THREE MONTHS) WITH A SOCIAL AGENCY

II. CORROBORATIVE EVIDENCE PROVIDED

A. LAW ENFORCEMENT RECORDS, MEDICAL RECORDS OR BIRTH CERTIFICATE INDICATE THE CHILD WAS CONCEIVED AS A RESULT OF RAPE INCEST

B. COURT DOCUMENTS OR OTHER RECORDS INDICATING LEGAL PROCEEDINGS FOR ADOPTION OF THE CHILD ARE PENDING BEFORE A COURT

C. A WRITTEN STATEMENT FROM A PUBLIC OR PRIVATE AGENCY CONFIRMING AGENCY INVOLVEMENT WITH THE CARETAKER REGARDING THE POSSIBILITY OF GIVING THE CHILD FOR ADOPTION.

D. MEDICAL RECORDS CONFIRMING THE EMOTIONAL HEALTH STATUS OF THE
 CHILD CARETAKER

E. A WRITTEN STATEMENT FROM A MENTAL HEALTH PROFESSIONAL CONFIRMING THE EMOTIONAL HEALTH STATUS OF THE CHILD CARETAKER

F. A STATEMENT FROM AN INDIVIDUAL WHO HAS KNOWLEDGE OF THE CARETAKER'S CIRCUMSTANCES.
 FRIEND CLERGY MEDICAL PROFESSIONAL
 NEIGHBOR SOCIAL WORKER OTHER

III. DECISION

GOOD CAUSE CLAIM ESTABLISHED COOPERATION REQUIREMENTS WAIVED

GOOD CAUSE CLAIM DENIED COOPERATION REQUIREMENTS APPLICABLE

CASEWORKER SIGNATURE

DATE SENT TO BUREAU OF CHILD SUPPORT