

COURT OF PROBATE [Type or print in black ink.]



TO: COURT OF PROBATE, IN THE MATTER OF	DISTRICT NO.	RESPONDENT'S DATE OF BIRTH
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Hereinafter referred to as the respondent.

PRESENT ADDRESS OF RESPONDENT [If institutionalized, give name and address of institution.]

PETITIONER [Name, address, zip code, and telephone number]	ATTORNEY SELECTED BY RESPONDENT, if any. [Name, address, zip code, telephone number, and juris number]
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PSYCHOLOGIST SELECTED BY RESPONDENT, if any. [Name, address, zip code, and telephone number.] C.G.S. 17a-274	CONN. PSYC. LIC. NO.
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PERSONS TO WHOM NOTICE SHOULD BE GIVEN: PARENT(S), GUARDIAN(S), CONSERVATOR, CLOSEST RELATIVES [If none, so state,] and INTERESTED PARTIES as defined in Probate Practice Book, Rule 3.1.02. [Give names, addresses, zip codes, and relationships to respondent.]

Note: In addition to the above, the Commissioner of Developmental Services and the Department of Protection and Advocacy must be given notice in all cases.

Additional data [on Second Sheet, PC-180], if any, is made a part hereof.

THE PETITIONER REPRESENTS that:

The respondent is now living at the present address written above.

The respondent has has not received public assistance or institutional care from the State of Connecticut. C.G.S. Ch. 302.

The respondent is is not in an institution for the mentally ill or mentally deficient in this State. C.G.S. §4a-17.

The respondent is a person with intellectual disability, AND

The respondent is unable to provide for himself or herself at least one of the following: education habilitation care for personal and mental health needs meals clothing safe shelter or protection from harm [Check those that apply.] AND

The respondent has no family or guardian to care for him or her; OR

The respondent's family or guardian can no longer provide adequate care for him or her.

The respondent is unable to obtain adequate, appropriate services that would enable him or her to receive care, treatment, and education, or habilitation without placement by a court of probate.

The respondent is not willing to be placed under the custody and control of the Department of Developmental Services or its agents, or such placement is being sought or contested by the guardian or limited guardian of such person.

WHEREFORE, THE PETITIONER REQUESTS that the court place the respondent with the Department of Developmental Services for placement in the least restrictive environment available or that can be created within the existing resources of the department.

The representations contained herein are made under the penalties of false statement.

Date:

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Petitioner: