



In The Court of Common Pleas, Lucas County, Ohio
Juvenile Division

Case Number: _____

IN THE MATTER OF:

**REQUEST FOR HEARING ON A
QUALIFIED RESIDENTIAL TREATMENT
PROGRAM (QRTP) PLACEMENT**

- 1. _____
Child's Name
- _____
- DOB
- _____
- Address
- _____
- City, State, Zip Code

The above-named child was placed at _____ (*name of facility*),
a Qualified Residential Treatment Program (QRTP) on _____ (*date*).

I, _____ (*Petitioner's name*), am requesting that the Court conduct a hearing
regarding the child's placement in said Qualified Residential Treatment Program (QRTP).

Signature of Requestor

Printed Name of Requestor

Address of Requestor

Cell Phone Number

City, State and Zip Code

Other Phone Number

Email

Fax Number