## Committee for Public Counsel Services Children and Family Law Division (617) 482-6212

## APPELLATE ASSIGNMENT INTAKE FORM (2 PAGES)

Case (Child) Name:			
Trial Court & Judge:	Trial Court & Judge: Docket:		
		nation/ Guardianship/ Private Adoption/29B	
Other			
Client's Name & Contact Info	ormation:		
Names and dates of birth of all	Relationship	Trial Attorney	
parties	(Mother/Father/ Children/Other)	(Name/Address/Phone Number/Email address)	
Department of Children & Families	Same		
Note: Please specify if children are refather involved or represented in the		counsel, or if there is more than one mother or	
Please indicate which party(ie ☐ Mother	es) filed a notice of	appeal:	
☐ Child(ren) ☐ Other:	☐ Guardian		
Date notice of appeal filed: _			
Date on which motion for app	pointment of appella	ate counsel was allowed:	

Are there any outstanding	issues regarding a parent-client's indigence/right to counsel?
Please identify issue(s) on  Sufficiency of the evide Reasonable efforts Due process violation (compost-adoption/post-termane) Adoption plan/permane; Sibling visitation Other (describe):	describe):ination visitation
Is client currently incarcers  ☐ No ☐ Y	ated and/or out-of-state? Tes. Location:
Where are child(ren) locate  ☐ Kinship placement  ☐ Non-adoptive foster car  ☐ With parent	☐ Pre-adoptive home
If you represent a child or	children, how did you arrive at the client's position?
Child 1: age  □ Express preferences □ Substituted judgment □ GAL/next friend	Child 2: age Child 3: age  □ Express preferences □ Express preferences □ Substituted judgment □ Substituted judgment □ GAL/next friend □ GAL/next friend
	all notices of appeal and motions for appointment of appellate ner parties) to Abigail Salois, staff counsel with the CAFL

Appellate Panel Support Unit:

Email: Asalois@publiccounsel.net