|  |
| --- |
| ONTARIO |
|  |  | Court File Number      |
| at | (Name of court) | **Form 35.1A: Affidavit (child protection information)** |
|       |
|  | (Court address) |
| Applicant(s) |
| Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any). |  | Lawyer’s name & address — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any). |
|       |  |       |
| Respondent(s) |
| Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any). |  | Lawyer’s name & address — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any). |
|       |  |       |
| **My name is** *(full legal name)* |       |
| **I live in:** *(name of city, town or municipality and province, state or country if outside of Ontario)* |
|       |
| **I swear/affirm that the following is true:** |
| **1.** | **I am currently or I have been involved in the following child protection court cases:** *(attach a copy of any relevant court orders or endorsements you have)*  |
| **Names of people involved in the case** | **Name of children's aid society** | **Court location** | **Court orders made** *(include dates of orders)* |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
| 2. | I have been involved with child protection services in the following way: |
| **Names of other people involved** | **Name of children's aid society** | **Location of children’s aid society** | **Child protection service(s)** *(include dates of any agreements or other measures)* |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

|  |  |  |  |
| --- | --- | --- | --- |
| **Form 35.1A:** | **Affidavit (child protection information)** | **(page 2)** | Court File Number  |
|  |  |
| 3. | To the best of my knowledge, the other party and/or the children in this case have been involved in the following child protection court cases:  |
| **Names of people involved in the case** | **Name of children's aid society** | **Court location** | **Court orders made** *(include dates of orders)* |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
| 4. | To the best of my knowledge, the other party and/or the children in this case have been involved with child protection services in the following way: |
| **Names of people involved** | **Name of children's aid society** | **Location of children’s aid society** | **Child protection service(s)** *(include dates of any agreements or other measures)* |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|  |
| Sworn/Affirmed before me at |       |  |  |  |
|  | Municipality |  |  |  |
| in |       |  |  |  |
|  | province, state, or country |  |  |  |
| on |       |  |  |  |  | Signature(This form is to be signed in front of a lawyer, justice of the peace, notary public or commissioner for taking affidavits.) |
|  | Date |  | Commissioner for taking affidavits |  |  |
| (Type or print name below if signature is illegible.) |