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PACFile[®]

1. Locate the petition or application form Open a new web browser page and enter the following address:

www.pacourts.us/forms dependency-forms/.

C 🙃 合 https://www.pacourts.u	is/forms/dependency-forms/ A [%] ব্
Dependency Forn	1S •
PDF Forms	
Application for Emergency Protective Custody with Cover Page	Dependency Petition
Petition/Application Cover Page - Dependency/Shelter Care/Emergency Custody	1 Shelter Care Application
Notice of Orphans Court Appeal Decision	Notice of Orphans Court Petition Filing
Notice of Orphans Court Order	Notice of Orphans Court Appeal Filing
Motion for Resumption of Jurisdiction	
Word Forms - Fillable	
Ø Order of Adjudication - Child Dependent	Aggravated Circumstances Order
Application for Emergency Protective Custody	Application for Emergency Protective Custor with Cover Page
Dependency Petition	Dependency Petition with Cover Page
Dispositional Order	 Order Regarding Modification of Child's Placement

O Dependency Forms | Forms | Unif x +

3. Complete and save the petition or application for the specified child

Complete the form and save the document to any location on your computer, shared drive, or portable storage device (ex. memory stick).

Γ		- 9 -	
	•	-2025-	DEPENDENCY PETITION
	-		In the Interest Of:
			, a Minor
	To the Honorable Judge of said Court:		
	The petitioner respectfully represents that the above mentioned child is a	DEPEND	ENT CHILD, as defined by
	The Juvenile Act at 42 Pa.C.S.§ 6302. It is within the jurisdiction of the C	Court and	in the best interests of said
	child and the public that this proceeding be brought before the Court for the	e following	reasons:
	The child		

1) is without proper parental care or control, subsistence, education as required by law, or other care or control necessary for his/her physical, mental, or emotional health, or morals; a determination that there is a

2. Choose a format for the petition or application Blank forms are available in PDF and

Microsoft Word formats (see pictures). You can use either format, but the petition/application must be uploaded to PACFile as a PDF. See the Tips below before deciding.

There are distinct advantages to using each format. Refer to the PACFile Help System, using the Help link on any PACFile screen, for more information.

Tip A Microsoft Word document can be saved as a PDF. A step-by-step guide for that process can be found in the PACFile Help System by clicking the Common Pleas tab and then the Step-by-Step Guides link.

4. Complete additional petitions or applications

If the child has siblings that require a separate petition/application, repeat Steps 2 - 3 as needed.

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5. Navigate to the UJS Web Portal

Open a new web browser page and enter the following address: <u>https://ujsportal.</u> pacourts.us.

https://ujspo View Favorites	rtal.pacourts.us/l s Tools Help	Ø + 🗎 → <i> ế</i> Login		×	□ – 公 公
COURT					Create New Accour
	SYS	Unified JUDI FEM of PENN PORTAL		IIA	Unified Judicial System we UJS Forms PAePay Brochure Collections in the Courts Financial Records
	Home	Case Information	Pay Online	Help & Support	
Enter	r your User Nam	e and Password as prov	ided by AOPC. Pa	issword is case sensitive	9
	* User Nam	ne: rrlincoln]	
	* Deceure	rd: •••••			

Pennsylvania's Unified Judicial Sy: 🗙

https://ujsportal.pacourts.us

+

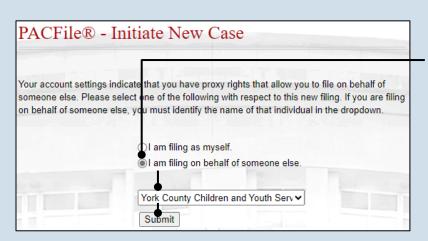
6. Login to the UJS Web Portal

Click the Login link, enter your UJS Web Portal user name and password, and click LOGIN.

7. Open the case initiation wizard Click on the 'Initiate New Case' option in the PACFile menu or

the Initiate New Case link on your Dashboard.

PACFile®	Pay Online	Help & Support		
Dashboard	_		1	Actions
Initiate New	Case		OR	
Case Filing				Initiate New Case
PACFile Sea	rch 🕨			Case Filing
My Profile				
Terms and C	onditions			



8. Select your proxy status Select the I am filing on behalf of someone else radio button, choose the appropriate filing authority from the dropdown, and click SUBMIT. The Select Filing screen displays.



9. Select a Court Name Click the Court Type dropdown and select 'Court of Common Pleas'.

11. Verify the Docket Type In the Docket Type

field, select 'Dependency' or verify that it defaults automatically.

13. Verify the Filing Type In the Filing Type field verify or select the document that is initiating the case.

Select Filing			
The beginning of the case initiation he court in which the case is bein prefixed with a star (*) are required	g filed and the type of documen		
Court Type:	Court of Common Pleas	~ 🕄	
* County:	York	•• 😮	
* Docket Type:	Dependency	~ 🕑	
* Case Category:	Dependency - Abuse/Neglect		
* Filing Type:	Dependency Petition	~	in the second
Description:		3	
	Submit		

0. Select a County Click on the **County** propdown and select he county court in which the dependency ase is being filed.

2. Verify the Case Category n the Case Category ield, select Abuse/Neglect' or Status Offense'.

14. Click SUBMIT

15. Build from an existing sibling case?

If creating a case for a child who has a sibling with an existing dependency or juvenile case, continue to Step 16.

If creating a case for a child with no siblings, or none with an existing case, select 'No' and proceed to Step 23.

Tip When applicable, the information on a sibling case can be used to build the new dependency case.

PACFile® - Initiate New Case	
Click Yes if the child's case can be created from an existing case. This only applies if the existing case is associated to a sibling. Click No if the child has no known siblings with an existing case.	
* Do you want to select a Case: ⊚Yes● ◯No	16. Select 'Yes' and click SUBMIT
Submit	

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17. Identify the sibling case number Click in the Docket Number field and enter the docket number of the sibling's case.

If you do not have the exact formatting of the docket number, select the **Build Docket Number** checkbox to use selectable fields to assist in entering the number.

19. Select the case

Within the search results, click the Select Case icon appearing next to the sibling's case.

If this action does not identify any associated cases, proceed to Step 22.

If PACFile identifies associated cases, continue to Step 20.

21. Click OK

23. Does a child need to be added?

If a child needs to be added, click the Add Child icon and continue to Step 24. If not, proceed to Step 26.

Select Cases				
Use the Select Cases button the existing case is associat siblings with an existing cas	ed to a sibling. Use		-	
	urce: Pennsylvania	Court	~	
	Type: Docket Number		•	
Docket Nur	nber: CP-67-DP-000	0218-2023		
Build Docket Nur	nber:			
10 B 10	Sea	arch e Clear		
Cases				
Docket Number S	hort Caption		Case Status	iling Date
CP-67-DP-0000218-2023 In	the Interest of: Tombe	si, Gina, a Minor	Active	10/26/2023 🗾 🗖
Cases				
Docket Number 9	Short Caption		Case Status	Filing Date
		eri Oire e Miner	Antino	10/26/2023
CF-07-DF-0000218-2023	n the Interest of: Tomb	Jesi, Gina, a Minor	Active	10/20/2023
Associated Cases			- -	
Docket Number	Short Caption		Case Status	Filing Date
CP-67-DP-0000219-2023		mbaci. Garratt a Mir		10/26/2023
CF-07-DF-0000219-2023	In the interest of. To	mbesi, Garrett, a Mil	IOI Active	10/20/2023
		Ok		
		Ok		
		Ok		
Reference Cases		Ok		
Reference Cases	Pofessor			
Reference Cases	Referen ve Cr	ases		
Reference Cases	Docket Number	ases Short C		
Reference Cases	Docket Number	ases		esi, Gina, a Minor
Reference Cases	Docket Number CP-67-DP-00002	ases Short C	terest of: Tombe	
AL T. M.	Docket Number CP-67-DP-0000 CP-67-DP-0000	ases Short C 218-2023 In the Ir	terest of: Tombe	
Reference Cases	Docket Number CP-67-DP-0000 CP-67-DP-0000	ases Short C 218-2023 In the Ir	terest of: Tombe	
AL T. M.	Docket Number CP-67-DP-0000 CP-67-DP-0000	ases Short C 218-2023 In the Ir 219-2023 In the Ir	terest of: Tombe	

Submit

18. Click SEARCH

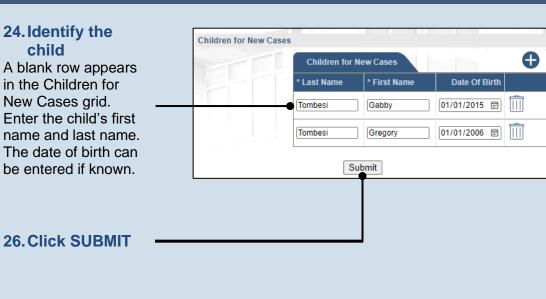
20. Specify any associated cases

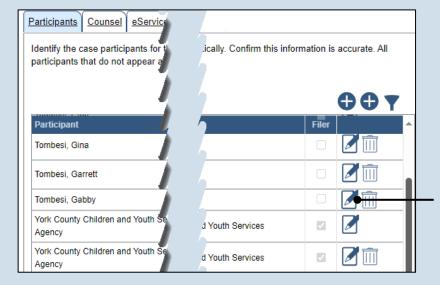
When there are other sibling cases associated with the one you identified in Step 17, they will appear in the Associated Cases grid. Select the checkbox for each case to which the new dependency filing applies.

22. Review children

Review the names in the Children for New Cases section. A new dependency case will be created for each name appearing in this grid. If a child appears inappropriately, click the Delete icon in the row that corresponds to their name.

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Add/Edit Participant Contact Information Demographic Information Identifying Information Represented By Participant Category: Person * First Name: Gabby Middle Name: * Last Name: Tombesi 28. Edit the child's Generation: profile Phone Number 1: In the Contact Phone Number 1 Ext: Information tab of the Phone Number 2: Add/Edit Participant Phone Number 2 Ext popup screen, enter Fax Number: the address of the Email Address: * Role: Child child, if known, and any other applicable Address Type: Home ~ Address Line 1: 123 Main Street details.

25. Does another child need to be added?

If a dependency case(s) needs to be created for any other sibling(s), repeat Steps 23 - 24.

If there are three or more children, and a parent or legal guardian applies to more than one, but not all children, it is recommended that you complete the wizard for the children in common first and then repeat the process for the remaining children.

27. Edit the child participant

In the Participants tab, click the View/Edit icon for the child that corresponds to the new dependency case. If cases are being created for multiple children, select one.

The appropriate county agency appears on the case automatically.



29. Record the child's demographic details Click the Demographic Information tab and record additional details, if known,

If available, recording the gender, race, and ethnicity is recommended. This information automatically populates on the Dependency cover page, which is created later in this process.

31. Edit any other child records

Repeat Steps 27 - 30, as needed, for any other participants in the role of 'Child'.

33. Additional participants needed? If a participant needs to be added to the case, continue to Step 34.

Tombesi, Roberta

If no additional participants need to be added, proceed to Step 43.

Add/Edit Participant				
 Contact Information Demogra	aphic Information	Identifying Information	Represented By	
Date Of Birth:	01/01/2015 📰		-	
Place Of Birth:		~		
Gender:	Female	~		
Race:	White	~		
Ethnicity:	Non Hispanic	~		
Tribal Affiliation:				
Hair Color:		~		
Eye Color:		~		
Skin Tone:		~		
Height(feet):				
Height(inches):				
Weight(Ibs):				
	Save	,		30. Click SA

Participants Counsel eService	Filing Documents Verification	1		-
Identify the case participants for th information is accurate. All particip Show inform				
Participant	Docket Number	Pro Se	Role	Filer 4
Tombesi, Roberta	Tombesi, Gabby - 1/1/2015		Biological Mother	
York County Children and Youth Services Agency	Tombesi, Gabby - 1/1/2015		Children and Youth Services	
Tombesi, Alex	Tombesi, Garrett - 1/1/2006		Father	
Tombesi, Gabby	Tombesi, Garrett - 1/1/2006		Sibling	
Tombesi, Garrett	Tombesi, Garrett - 1/1/2006		Child	
Tombesi, Gina	Tombesi, Garrett - 1/1/2006		Sibling	□ 🖉
Tombesi, Gregory	Tombesi, Garrett - 1/1/2006		Sibling	

Biological Mother

Tombesi, Garrett - 1/1/2006

32. Review and edit other default participants

In the Participants tab, if any other participant defaulted on the case automatically, excluding the county agency, click the corresponding View/Edit icon and use Steps 27 - 30 as a guide to verify/update the record.

If a participant appears multiple times, like a parent, it is only necessary to verify/update one instance of that participant.



34. Does the participant apply to multiple cases? If creating multiple cases at once, click on the Show information for dropdown and decide whether the new participant applies to all children or a single child.

Participants Counsel eService Filing Documents Verification

Identify the case participants for the new dependency case. Some participants may be listed below automatically. Confirm this information is accurate. All participants that do not appear automatically must be created using the ADD button.

Participant	Docket Number	Pro Se	Role	Filer
Tombesi, Roberta	Tombesi, Gabby - 1/1/2015		Biological Mother	
York County Children and Youth Services Agency	Tombesi, Gabby - 1/1/2015		Children and Youth Services	
Tombesi, Alex	Tombesi, Garrett - 1/1/2006		Father	
Tombesi, Gabby	Tombesi, Garrett - 1/1/2006		Sibling	
Tombesi, Garrett	Tombesi, Garrett - 1/1/2006		Child	□ 🚺 🗊
Tombesi, Gina	Tombesi, Garrett - 1/1/2006		Sibling	
Tombesi, Gregory	Tombesi, Garrett - 1/1/2006		Sibling	
Tombesi, Roberta	Tombesi, Garrett - 1/1/2006		Biological Mother	

35. Click the Add Participant icon

	Add/Edit Participant	
	Contact Information Demographic Information Identifying Information Represented By	
	Participant Category: Person	
36. Enter the	First Name: Lillieth Middle Name:	
participant	* Last Name: Lopicollo	
name	Generation:	
In the Contact	Phone Number 1: (484) 123-4567	
Information tab of the	Phone Number 1 Ext:	
Add/Edit Participant popup screen , enter	Phone Number 2:	
the name of the	Phone Number 2 Ext:	
participant in the First	Fax Number: ()	37. Add the
Name and Last	Email Address: ElliLo@gmail.com	participant role
Name fields.	* Role: Aunt	Click on the Role
Hume noids.	Address Type: Home	dropdown and select
	Address Line 1: 876 Main Street	the appropriate option.
	Address Line 2: Apt. 3a	
38. Enter the	Address Line 3:	
address of the	City: Hazelton	
participant (if	State: Pennsylvania	
known)	Zip Code: 18202	
kilo ili)	International Region:	
	Postal Code:	
	Country:	
	Save	

39. Click the Add/Edit Participant **Demographic** Information tab Contact Information Demographic Information Identifying Information Represented By Date Of Birth: 04/01/1949 🖃 Place Of Birth: ~ Gender ~ 40. Enter any Race: v information Ethnicity ~ about the Tribal Affiliation: participant Hair Color: ¥ Eye Color: ¥ Skin Tone: ~ None, some, or all of Height(feet): the fields in this tab can Height(inches): be completed based on Weight(lbs): the information available. 41. Click SAVE Save

	Tombesi, Garrett	Tombesi, Gabby - 1/1/2015		Sibling	
	Tombesi, Gabby	Tombesi, Gabby - 1/1/2015		Child	
	Tombesi, Alex	Tombesi, Gabby - 1/1/2015		Father	
	Lopicollo, Lillieth	Tombesi, Gabby - 1/1/2015		Aunt	
L					
		Next	Save	٦	
		Next	Save	J	

43. Click NEXT

Participants Counsel eService Filing Documents Verific button. If representation If participant representation is known, attorneys may be identifie the identification of counsel is not required 45. Initiate the Show information for: ALL process to add an attorney Docket. Counsel In the Counsel tab. York County Office of Children, Youth and Families n Services Tombesi. **A** m click the Add Counsel Solicitor's Office 1/1/2000 icon. York County Office of Children, Youth and Families Tombesi n Services 1/1/2000 Solicitor's Office York County Office of Children, Youth and Families Tombesi h Services **Z** m Solicitor's Office 1/1/201 Previous Next Save

42. Create additional participant records

Repeat steps 34 - 41, as needed, for any other individuals who need to be added to the case.

Tip Be sure to specify the appropriate role for each individual.

44. Does an attorney need to be added?

If an attorney needs to be added, continue to Step 45. If no attorneys need to be added, proceed to Step 53.

This step applies whether one or multiple cases are being created.

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46. Perform a search In the Add/Edit Counsel popup screen, click on the Search Type dropdown and determine how you want to find the attorney that needs to be added to the case Based on this selection, enter the appropriate number or name in the field below and click the

	Sear	ch		
Counsel		PA Bar Number	Law Firm	
O James, Ryan H	larrison	313049		
James, Shelley	Renee	087717		
James, Sherma	an	900013		
O Jameson, Willi	am B.	058949		
	Sele	ct		

47. Identify the attorney

Based on your search results, identify the attorney you want to add to the case by clicking the radio button that appears next to their name.

48. Click SELECT

SEARCH button.

Add/Edit Counsel			
Contact Information Represe	enting		
Participant Category:	Person 🗸		
* First Name:	Sherman]	
Middle Name:]	
* Last Name:	James]	
Generation:	~		
PA Bar Number:	900013		
Phone Number 1:	(717) 123-4567		
Phone Number 1 Ext:	6543		
Phone Number 2:	()		
Phone Number 2 Ext:			
Fax Number:	()		
Email Address:	900013@test.ars	1	
Address Type:	Mailing ~		
Address Line 1:	123 Main Street		
Address Line 2:			
Address Line 3:			
City:	Camp Hill		
State:	Pennsylvania 🗸		
Zip Code:	17111		
International Region:		jl	
Postal Code:) I	
Country:	~		
	Save		

49. Verify the contact details The information that

appears on the Contact Information tab is based on what is on file with the Pennsylvania Disciplinary Board.

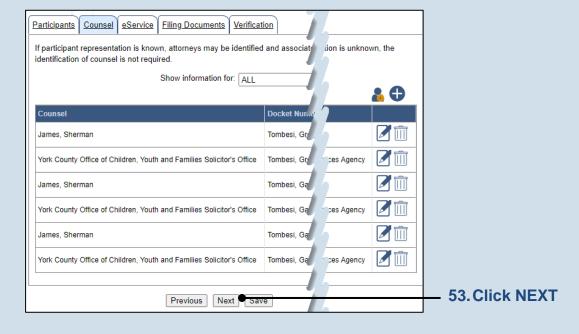
PACFile[®]

50. Identify the case

participant Click on the Representing tab and select the checkbox for the appropriate participant.

Add/Edit Counsel	
Contact Information Representing	
Representing: Tombesi, Garrett (Tombesi, Gregory - 1/1/2006, Sibling)	
Tombesi, Alex (Tombesi, Gregory - 1/1/2006, Father)	
🗹 Tombesi, Roberta (Tombesi, Gregory - 1/1/2006, Biological Mother) 🌱	
🗌 Tombesi, Gina (Tombesi, Gregory - 1/1/2006, Sibling)	
🗌 Tombesi, Gregory (Tombesi, Gregory - 1/1/2006, Child)	
York County Children and Youth Services Agency (Tombesi, Gregory th Service	es)
🗌 Tombesi, Gabby (Tombesi, Gregory - 1/1/2006, Sibling)	
🗌 Lopicollo, Lillieth (Tombesi, Gregory - 1/1/2006, Aunt)	
🗆 Tombesi, Gina (Tombesi, Garrett - 1/1/2006, Sibling)	
Tombesi, Roberta (Tombesi, Garrett - 1/1/2006, Biological Mother)	
🗌 Tombesi, Alex (Tombesi, Garrett - 1/1/2006, Father)	
Tombesi, Garrett (Tombesi, Garrett - 1/1/2006, Child)	
🗌 Tombesi, Gregory (Tombesi, Garrett - 1/1/2006, Sibling)	
🗌 Tombesi, Gabby (Tombesi, Garrett - 1/1/2006, Sibling)	
York County Children and Youth Services Agency (Tombesi, Garrett - Services)	s)
🗌 Lopicollo, Lillieth (Tombesi, Garrett - 1/1/2006, Aunt)	
🗹 Tombesi, Roberta (Tombesi, Gabby - 1/1/2015, Biological Mother)	
🗌 Tombesi, Garrett (Tombesi, Gabby - 1/1/2015, Sibling)	
🗌 Tombesi, Gregory (Tombesi, Gabby - 1/1/2015, Sibling)	
Tombesi, Alex (Tombesi, Gabby - 1/1/2015, Father)	
Tombesi, Gina (Tombesi, Gabby - 1/1/2015, Sibling)	
□ Tombesi, Gabby (Tombesi, Gabby - 1/1/2015, Child)	
York County Children and Youth Services Agency (Tombesi, Gabby - 1/ Services	٤)
Lopicollo, Lillieth (Tombesi, Gabby - 1/1/2015, Aunt)	
Save	51.Click SAV

52. Add other attorneys Repeat Steps 45 - 51, as needed, to add any other attorneys to the filing.





54. Identify eService recipients

In the eService tab, select the checkboxes for any eligible recipients that should receive electronic service upon submission of the filing.

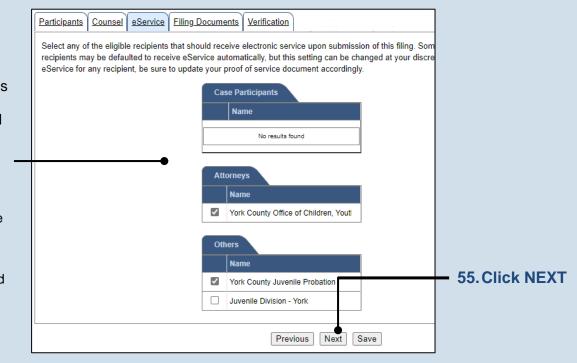
Some of the eligible recipients may be selected to receive eService automatically, but this can be changed at your discretion.

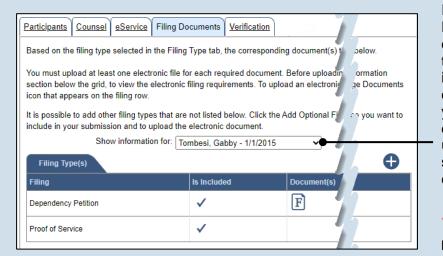
56. Generate the Proof(s) of Service

Before proceeding in the PACFile wizard, you must create your proof of service document(s). This task needs to be completed outside of PACFile in a program of your choosing. Be sure to include any individuals notified via eService and save this document as a PDF.

If filing multiple petitions, create separate proof of service documents for each.

Click the SAVE button in the wizard. If you logout of PACFile before continuing this process, your filing can be found under the Saved Filings tab on your Dashboard.





57. Identify a child

In the Filing Documents tab, select or verify the option in the **Show filing information for** dropdown. Based on

your selection, any documents created or uploaded apply to the selected child or to all children.

When cases are being created for multiple

children, it may be necessary to select each child individually through this dropdown so any unique documents are only associated with the appropriate child.



58. Initiate the process to complete the cover page Click on the **Dependency Cover** Page icon in the grid. The Fillable Forms popup screen displays.

		unsel	<u>eService</u>	Filing Do	cuments	Verification				
Based	on the filing	g type	selected in	the Filing	Type tab,	the correspon	nding docu	ument(s) t	ŀ	
section icon th It is po	n below the at appears	grid, t on the dd othe	o view the e filing row. er filing type	electronic f es that are i	iling requi not listed	quired docume rements. To u below. Click th document.	ipload an	electronic		
	,					, Gabby - 1/1/	2015	~		
Fili	ng Type(s)					, ,]		
Filing					Is Include	ed	Docu	iment(s)		
Depen	ndency Petiti	ion			\checkmark		F		1	
Proof	of Service				~				-	
	of Service				•				-	
									J	
Fillable Form										
			FI	ID:						
	dency: The c Act at				he jurisdicti	on of the court a	as defined b	y The Juver	nile	
	dency: The c Act at		med above c .C.S.§6302.	omes within t	-	on of the court a	as defined b	y The Juver	nile	
Type of Depen	dency: The c Act at		med above co .C.S.§6302. (1) is withou	omes within t ut proper care	e or control	on of the court a ption in violation		y The Juver	nile	59. Com
Type of Depen	dency: The c Act at	t 42 Pa ☑	med above co .C.S.§6302. (1) is withou	omes within t ut proper care	e or control care or ado			y The Juver	nile	59. Com infor
Type of Depen	dency: The c Act at	it 42 Pa	med above co .C.S.§6302. (1) is withou (2) has bee (3) has bee (4) is withou	omes within t ut proper carr on placed for on abandoned ut a parent, g	e or control care or ado d juardian, or	ption in violation legal custodian	n of law	-		
Type of Depen	dency: The c Act at	it 42 Pa	med above cr .C.S.§6302. (1) is withor (2) has bee (3) has bee (4) is withor (10) is born	omes within t ut proper carr on placed for on abandoned ut a parent, g	e or control care or ado d uardian, or whose pare	ption in violation	n of law	-		infor
Type of Depen	dency: The c Act at	it 42 Pa	med above cr .C.S.§6302. (1) is withor (2) has bee (3) has bee (4) is withor (10) is born	omes within t ut proper carr in placed for in abandoned ut a parent, g i to a parent v	e or control care or ado d uardian, or whose pare	ption in violation legal custodian	n of law	-		infor
Type of Depen Abuse and/or N	dency: The c Act at	t 42 Pa □ □ □	med above co .C.S.§6302. (1) is withou (2) has bee (3) has bee (4) is withou (10) is born been invole The petitior	omes within t ut proper care on placed for an abandoned ut a parent, g to a parent v entarily termin	e or control care or ado d juardian, or whose paren nated	ption in violation legal custodian	n of law egard to and	other child f	lave	infor the c
Type of Depen Abuse and/or N	dency: The c Act at	t 42 Pa □ □ □	med above co .C.S.§6302. (1) is withou (2) has bee (3) has bee (4) is withou (10) is born been invole The petitior	omes within t ut proper carr in placed for an abandoned ut a parent, g o to a parent v intarily termin	e or control care or ado d juardian, or whose paren nated	ption in violation legal custodian ntal rights with re	n of law egard to and	other child f	lave	infor
Type of Depen Abuse and/or N Abuse	dency: The c Act at	 ■ > >	med above co .C.S.§6302. (1) is withou (2) has bee (3) has bee (4) is withou (10) is born been invole The petition defined at 2 (5) while s	omes within t ut proper carr on placed for on abandoned ut a parent, g o to a parent v entarily termin n alleges that 23 Pa.C.S. §6 ubject to com	e or control care or ado juardian, or whose paren nated the above n 5303 pulsory sch-	ption in violation legal custodian ntal rights with re	n of law egard to and n victim of ch	other child h e	s	infor the c
Type of Depen Abuse and/or N Abuse	dency: The c Act at	 ■ > >	med above co C.S.§6302. (1) is withou (2) has bee (3) has bee (4) is withou (10) is born been invole The petition defined at 2 (5) while si justification	omes within t ut proper carr on placed for on abandoned ut a parent, g o to a parent v entarily termin n alleges that 23 Pa.C.S. §6 ubject to comp truant from s	e or control care or ado juardian, or whose paren nated the above n 5303 pulsory schr school	ption in violation legal custodian ntal rights with re named child is a	n of law egard to an n victim of ch s habitually	other child f e	s	infor the c
Type of Depen Abuse and/or N Abuse	dency: The c Act at	 ■ > >	med above co C.S.§6302. (1) is withou (2) has bee (3) has bee (4) is withou (10) is born been invole The petition defined at 2 (5) while so justification (6) has con	omes within t ut proper carr on placed for on abandoned ut a parent, g ot o a parent v entarily termin n alleges that 23 Pa.C.S. §6 ubject to comp truant from s nmitted a spe	e or control care or ado juardian, or whose paren nated the above i 5303 pulsory sch- school ciclic act or a	ption in violation legal custodian ntal rights with re named child is a pool attendance is	n of law egard to an n victim of ch s habitually disobedienc	other child f e	s	infor the c
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Father's w

Ok View Draft

Guardian's Relationship:

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Tip When finished with the preview, close the PDF. If needed, make changes to the Fillable Form popup screen, or click OK to return to filing and make additional changes to any tab. Return to the Fillable Form screen and click VIEW DRAFT again to review the changes.

60. Preview the

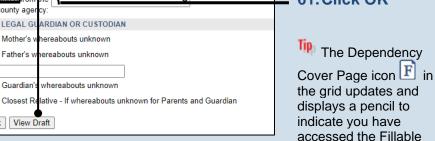
cover page

Click VIEW DRAFT

any time to generate

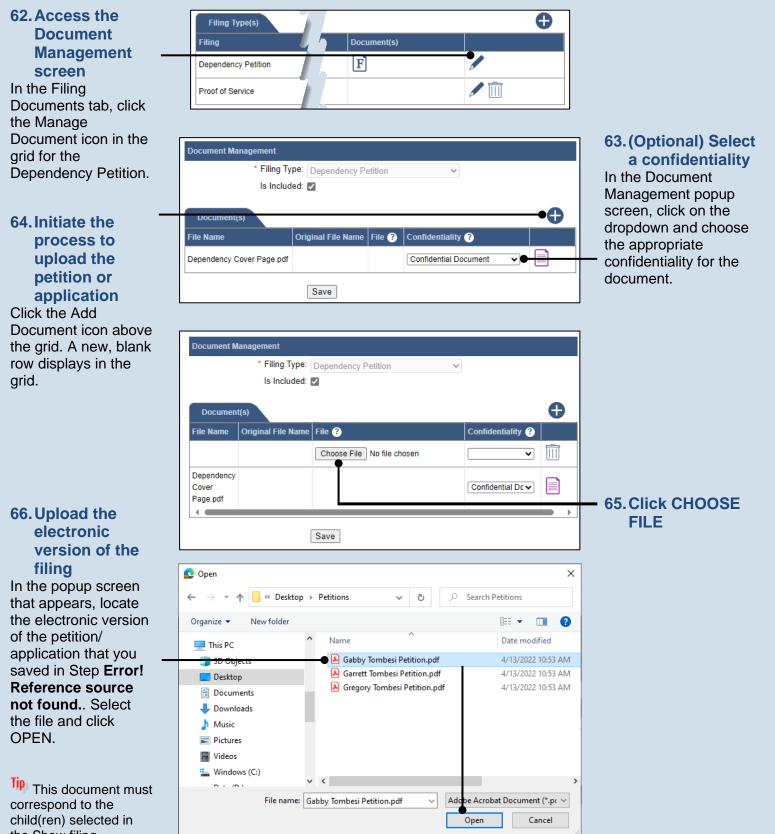
the PDF of the cover

page.



Form screen.

PACFile®



the Show filing information for dropdown.

How to Initiate a Dependency Case

with a Petition or Application

Is Included: 🔽

Original File Name File ?

* Filing Type: Dependency Petition

Choose File Gabby Tom...i Petition.pdf

Document Management

Document(s)

File Name

Dependency

Cover Page.pdf 4.6

PACFILA®

68. Click SAVE

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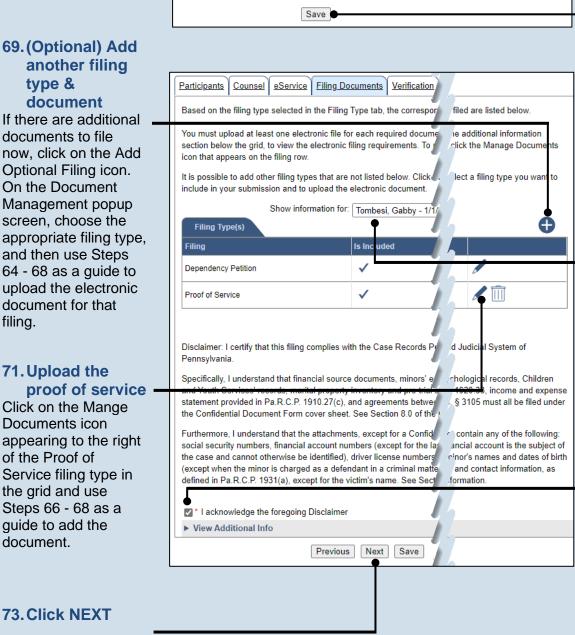
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Confid

Confidential Dov



In the Document Management popup screen, click on the dropdown and choose the appropriate confidentiality for the petition or application.



70. Identify a child If creating dependency cases for multiple children, select the next child in the Show filing information for dropdown and repeat Steps 58-68.

You can also select 'All Cases' to apply documents to all available children.

72. Certify the filing Select the checkbox that signifies that the filing complies with the provisions of the Public Access Policy.

You can locate the Public Access Policy at the following web address:

http://www.pacourts.us/ public-records/publicrecords-forms

another filing type & document

If there are additional documents to file now, click on the Add Optional Filing icon. On the Document Management popup screen, choose the appropriate filing type, and then use Steps 64 - 68 as a guide to upload the electronic document for that filing.

71. Upload the

Click on the Mange Documents icon appearing to the right of the Proof of Service filing type in the grid and use Steps 66 - 68 as a quide to add the document.

73. Click NEXT



74. Verify filing details

In the Verification tab, review the filing information that you have recorded for accuracy. If anything is incorrect, click on the appropriate tab and make the necessary changes.

When the filing is correct, click the VERIFY button.

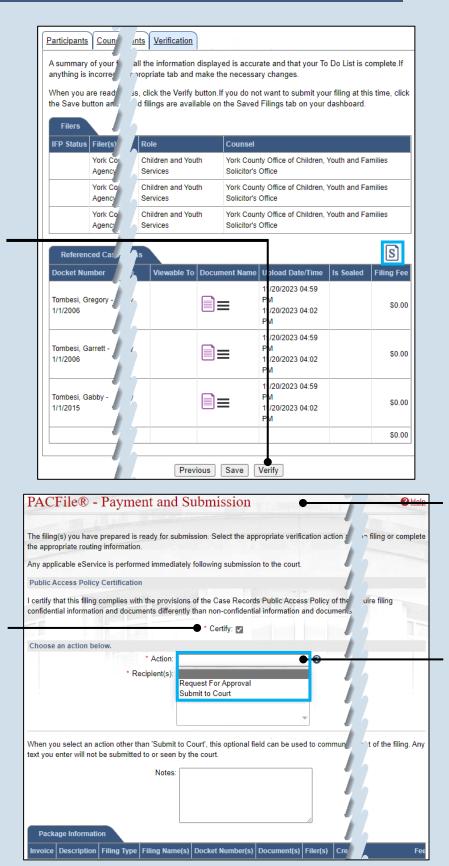
Click the Summary Report icon to generate the Verification Summary Report. You can print or save the report for your records.

76. Certify the filing

Select the checkbox that signifies that the filing complies with the provisions of the Public Access Policy.

You can locate the Public Access Policy at the following web address:

http://www.pacourts.us/ public-records/publicrecords-forms



75. Review the submitted filings

Verify that the correct filing information appears on the Payment and Submission page.

77. Choose an action

Select one of the following options from the **Action** field and proceed to the corresponding step:

- 'Request for Approval' – Select if the filing requires supervisory approval prior to submission. Continue to Step 78.
- 'Submit to Court' Select if the filing can be submitted without additional approval. Proceed to Step 79.

PACFile®

78. Identify an approver In the Recipients field, select one or more individuals who have the authority to approve the filing.

To select multiple recipients, press and hold the *[Ctrl]* key while clicking on each name.

This action indicates your request for approval and forwards the filing to the authorized individual(s).

PACFile®	Payment and Submission	P Help
	nave prepared is ready for submission. Select the appropriate verification outing information.	or complete
Any applicable eS	Service is performed immediately following submission to the court.	
Public Access Po	olicy Certification	
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	* Recipient(s):	

