

CONFIDENTIAL

State of Minnesota

District Court

County

Judicial District:	
Court File Number:	
Case Type:	Juvenile

In the Matter of the Welfare of the Child(ren) of:

**Confidential Information Form
(Form 11.4)**

_____ ☐ Parent(s) ☐ Legal Custodian(s)

Minn. R. Juv. Prot. P. 8.04, subd. 5

This form shall not be accessible to the public except by court order. This form shall be accessible to case participants as authorized by the court. This form shall be accessible to case parties unless it contains information in sections 3 (identity of reporter of abuse) or 4 (HIV-related information), in which case it shall be accessible to the parties as authorized by the court.

1. Name, address, home, or location of any shelter care or foster care facility in which a child is placed under a court order.

Reference in Document	Name of Shelter/Foster Care Facility or Parent	Shelter/Foster Care Address	Child in Shelter/Foster Care
Shelter / Foster Parent 1			
Shelter / Foster Parent 2			
Shelter / Foster Parent 3			

2. Information that identifies a child as a victim of an alleged or adjudicated sexual assault.

Reference in document	Child's First and Last Name	Child's Date of Birth (mm/dd/yyyy)
Child 1		
Child 2		
Child 3		
Child 4		

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3. Portions of juvenile protection case records that identify reporters of abuse or neglect

Reporter 1: _____
Reporter 2: _____
Reporter 3: _____

4. Information that a person has undergone HIV testing and/or HIV test results

5. Other information that is confidential by statute, rule, or court order

Filed by:

Name: _____
Signed: _____
Attorney Reg. #: (if attorney) _____
Firm/Agency Name: _____
Address: _____
City/State/Zip Code: _____
E-mail address: _____
Date: _____