Date: ­­­

**CSW/PO Documentation of Diligent Efforts to Include Youth's ERH in Education**

Social Worker/Probation Officer Name:

Youth’s Name: Youth’s Date of Birth:

Youth’s Current Education Rights Holder (“ERH”) Name:

It has been determined that ‘s current Education Rights Holder, \_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, is:

[ ]  Unavailable

[ ]  I attempted to contact the current ERH on the following dates:
1. 2. 3. 4.

 [ ]  Biological parent/ERH has not provided a working phone number or current address to CSW/PO in the last 90 days.

[ ]  ERH is unavailable because: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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[ ]  Unable

[ ]  Current ERH is in a closed facility with limited communication access (Note: consider whether a co-ERH would be appropriate)

 [ ]  Current ERH is deceased

 [ ]  Current ERH is unable to hold education rights because \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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[ ]  Unwilling

[ ]  After speaking with the youth’s current ERH on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [date], the ERH stated they were unwilling to continue to hold education rights because: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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[e.g., prior foster parent who no longer wishes to have contact with the youth]

The undersigned recommends that the current ERH’s education rights be limited and that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [name of proposed ERH] be appointed to hold education rights for this youth. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [name of proposed ERH] is a: [ ]  Relative [ ]  Nonrelative extended family member [ ]  Caregiver in the youth’s Planned Permanent Living Arrangement [ ]  Court Appointed Special Advocate [ ]  Other adult known to the youth. The youth and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [name of proposed ERH] have the following relationship:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

The attached [JV-535](http://www.courts.ca.gov/documents/jv535.pdf) form has been completed and is being submitted to the court to limit the education rights of the current ERH and appoint the proposed ERH.

If you have any questions, please contact me at . Thank you in advance for your assistance.

 CSW/PO Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_