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| ONTARIO | | | | | | | | |
|  |  | | | | | |  | Court File Number |
| (Name of court) | | | | | | Form 33C: Statement of Agreed Facts (Child Protection) |
| **at** |  | | | | | |
|  | Court office address | | | | | |
| Applicant(s) *[In most cases, the applicant will be a children’s aid society.]* | | | | | | | | |
| 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) *[In most cases, a respondent will be a “parent” within the meaning of section 74 of the* Child, Youth and Family Services Act, 2017*.]* | | | | | | | | |
| 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). | | |
|  | | | |  | | |
| Children’s Lawyer | | | | | | | | |
| Name & address of Children’s Lawyer’s agent for service (street & number, municipality, postal code, telephone & fax numbers and e‑mail address (if any)) and name of person represented. | | | | | | | | |
|  | | | | | | | | |
| **THE PEOPLE SIGNING THIS AGREEMENT ARE:** | | | | | | | | |
| *(Give full legal name. If you are a respondent, state your relationship to the child(ren). If you are an employee of the children’s aid society, state your position within the society.)* | | | | | | | | |
| *Print or type full legal name* | | | | | *Relationship to child OR position within children’s aid society* | | | |
|  | | | | |  | | | |
| *Signature* | | | | | *Date of signature* | | | |
|  | | | | |  | | | |
|  | | | | |  | | | |
| *Print or type full legal name* | | | | | *Relationship to child OR position within children’s aid society* | | | |
|  | | | | |  | | | |
| *Signature* | | | | | *Date of signature* | | | |
|  | | | | |  | | | |
|  | | | | |  | | | |
| *Print or type full legal name* | | | | | *Relationship to child OR position within children’s aid society* | | | |
|  | | | | |  | | | |
| *Signature* | | | | | *Date of signature* | | | |
|  | | | | |  | | | |
| **WE AGREE:** | | (a) | that the statements made on this form are true; and | | | | | |
| (b) | that this form may be filed with the court and may be read to the court as evidence, without affecting anyone’s right to test that evidence by cross-examination or to bring in other evidence. | | | | | |

| Form 33C: | | Statement of Agreed Facts (Child Protection) | (page 2) | | Court File Number | | |
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| **Note that “parent” means parent as defined in section 74 of the *Child, Youth and Family Services Act, 2017*.** | | | | | | | |
| **1.** | The information about the child(ren) in this case is as follows: | | | | | | |
|  | Full legal name of first child: | | | Date of birth | | Age | Sex |
|  |  | | |  | |  |  |
|  | Is the child a First Nations, Inuk, or Métis person? | | | | | | |
|  |  | | | | | | |
|  | Name of each of the child’s bands and First Nations, Inuit, or Métis communities and their representative(s) | | | | | | |
|  |  | | | | | | |
|  | If child was brought to a place of safety, address and identity of place from which the child was removed | | | | | | |
|  |  | | | | | | |
|  | Full legal name(s) of child’s parent(s) (List everyone who is a parent of the child as defined in section 74 of the Child, Youth and Family Services Act, 2017) | | | | | | |
|  |  | | | | | | |
|  | | | | | | | |
|  | Full legal name of second child: | | | Date of birth | | Age | Sex |
|  |  | | |  | |  |  |
|  | Is the child a First Nations, Inuk, or Métis person? | | | | | | |
|  |  | | | | | | |
|  | Name of each of the child’s bands and First Nations, Inuit, or Métis communities and their representative(s) | | | | | | |
|  |  | | | | | | |
|  | If child was brought to a place of safety, address and identity of place from which the child was removed | | | | | | |
|  |  | | | | | | |
|  | Full legal name(s) of child’s parent(s) (List everyone who is a parent of the child as defined in section 74 of the Child, Youth and Family Services Act, 2017) | | | | | | |
|  |  | | | | | | |
|  | | | | | | | |
|  | Full legal name of third child: | | | Date of birth | | Age | Sex |
|  |  | | |  | |  |  |
|  | Is the child a First Nations, Inuk, or Métis person? | | | | | | |
|  |  | | | | | | |
|  | Name of each of the child’s bands and First Nations, Inuit, or Métis communities and their representative(s) | | | | | | |
|  |  | | | | | | |
|  | If child was brought to a place of safety, address and identity of place from which the child was removed | | | | | | |
|  |  | | | | | | |
|  | Full legal name(s) of child’s parent(s) (List everyone who is a parent of the child as defined in section 74 of the Child, Youth and Family Services Act, 2017) | | | | | | |
|  |  | | | | | | |
| If there are more children, attach a sheet and number it. | | | | | | | |

| Form 33C: | | Statement of Agreed Facts (Child Protection) | (page 3) | Court File Number |
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| **2.** | The details of the children’s aid society’s previous involvement with one or more of these children in this case are as follows: | | | |
|  | *(Write “Nil” if no involvement. Indicate any involvement with children’s aid society in another part of Ontario or a child protection agency outside Ontario. Please remember that this is a statement of AGREED FACTS. That means that you must not set out something as a fact if another party disagrees with it. If you cannot agree at all about anything, write: “No agreement reached.”)* | | | |
|  |  | | | |
| **3.** | The child(ren) was/were brought to a place of safety because: | | | |
|  | *(If the child(ren) was/were not brought to a place of safety, write “Nil”. Again, there must be full agreement by all parties. Any point on which there is disagreement must be excluded. If there is no agreement at all on anything, write: “No agreement reached.”)* | | | |
|  |  | | | |
| **4.** | We agree that the court should make a finding that the child(ren) is/are in need of protection on the following reasons: | | | |
|  | *(Use only the reasons listed on page 3 of the application [form 8B]. Any reason on which there is disagreement must be excluded. If there is no agreement at all, write: “No agreement reached.” In any event, the court can always make some other finding.)* | | | |
|  |  | | | |
| **4.1** | The following important events relating to the child(ren)’s best interests have occurred since the date this application began: | | | |
|  |  | | | |
| **5.** | We agree that the order that would best serve the best interests of the child(ren) is: | | | |
|  | *(Again, list only the terms and conditions on which there is full agreement by all parties. If there is no agreement at all, write: “No agreement reached.” In any event, the court is always free to make some other order. If the order on which you all agree would remove the child(ren) from the care of the person who had the child(ren) before the case started, explain why less disruptive options would not be enough to protect the child(ren).)* | | | |
|  |  | | | |
| Put a line through any space left on this page | | | | | |