



**COMPLAINT FOR DEPENDENCY  
PURSUANT TO G. L. c. 119, § 39M**

Docket No.

**Massachusetts Trial Court  
Probate and Family Court**

☐ New

☐ Amended

\_\_\_\_\_  
First Name MI Last Name

**Plaintiff**

v.

\_\_\_\_\_  
First Name MI Last Name

**Defendant "Parent One"**

**If applicable:**

\_\_\_\_\_  
First Name MI Last Name

**Defendant "Parent Two"**

**Division**

1. Plaintiff, who resides at \_\_\_\_\_, is  
(Address) (Apt, Unit, No. etc.) (City/Town) (State) (Zip)

☐ a child seeking court orders pursuant to G. L. c. 119, § 39M.

**OR**

☐ the ☐ parent ☐ guardian ☐ \_\_\_\_\_ of a child seeking court orders pursuant to G. L. c. 119, § 39M.

2. The child who is the subject of the Complaint ("Child") is:

\_\_\_\_\_  
First Name M.I. Last Name

\_\_\_\_\_  
(Address) (Apt, Unit, No. etc.) (City/Town) (State) (Zip)

Child's date of birth is: \_\_\_\_\_

3. Parent One, \_\_\_\_\_, is,  
First Name M.I. Last Name  
who resides at: \_\_\_\_\_  
(Address) (Apt, Unit, No. etc.) (City/Town) (State) (Zip)

☐ the mother of Child who is the subject of the Complaint.

☐ the father of Child who is the subject of the Complaint.

☐ the deceased mother of Child who is the subject of the Complaint.

☐ the deceased father of Child who is the subject of the Complaint.

Reunification with Parent One is not a viable option for Child due to:

☐ abuse ☐ neglect ☐ abandonment or ☐ a similar basis under state law, namely:

(set forth legal standard, statutory law and/or case law)



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**4. If applicable:**

Parent Two, \_\_\_\_\_ ,  
First Name M.I. Last Name

who resides at: \_\_\_\_\_ is,  
(Address) (Apt, Unit, No. etc.) (City/Town) (State) (Zip)

- ☐ the mother of Child who is the subject of the Complaint.  
☐ the father of Child who is the subject of the Complaint.  
☐ the deceased mother of Child who is the subject of the Complaint.  
☐ the deceased father of Child who is the subject of the Complaint.

Reunification with Parent Two is not a viable option for Child due to:

☐ abuse ☐ neglect ☐ abandonment or ☐ a similar basis under state law, namely:

(set forth legal standard, statutory law and/or case law)

- 5.** Child is unmarried and under 21 years of age.
- 6.** Child is dependent on the Court for his/her protection, well-being, health, and safety.
- 7.** It is not in Child's best interest to return to \_\_\_\_\_ , the country of his/her and/or his/her  
Country  
parents' nationality or last habitual residence.
- 8. If applicable:** It is in the best interest of Child to continue in the care of:

\_\_\_\_\_  
First Name M.I. Last Name

- 9.** Affidavit(s) and/or other evidence regarding the facts alleged is/are attached in support of this Complaint.

**WHEREFORE,** Plaintiff/Child requests that the Court:

- ☐ find that Child is dependent on the Court  
☐ find that Child is under age 21  
☐ find that Child is unmarried  
☐ find that reunification of Child with Parent One is not a viable option due to:  
☐ abuse ☐ neglect ☐ abandonment or ☐ a similar basis under state law, namely:

by Parent One.



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☐ **If applicable:** find that reunification of Child with Parent Two is not a viable option due to:

☐ abuse ☐ neglect ☐ abandonment or ☐ a similar basis under state law, namely:

by Parent Two.

☐ find that it is not in Child's best interest to return to, \_\_\_\_\_, the country of his/her and/or  
Country  
his/her parents' nationality of last habitual residence.

☐ find that it is in the best interest of Child to continue in the care of:

\_\_\_\_\_  
First Name M.I. Last Name

☐ enter a Judgment pursuant to G. L. c. 119, § 39M

☐ order that Child be referred to the Probation Service for the following services:

☐ educational ☐ occupational ☐ medical ☐ dental ☐ counseling ☐ social ☐ domestic violence

☐ anti-trafficking ☐ and/or

services as needed.

☐ enter any other orders the Court deems necessary for the protection from abuse, abandonment, and neglect, and for  
the well-being, care, support, health and safety, and best interest of Child.

☐ enter an order for relief requested below, namely:



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Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Attorney or Plaintiff, if pro se

\_\_\_\_\_  
(Print name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Apt, Unit, No. etc.)

\_\_\_\_\_  
(City/Town)

\_\_\_\_\_  
(State)

\_\_\_\_\_  
(Zip)

Primary Phone #: \_\_\_\_\_

B.B.O. # \_\_\_\_\_

Email: \_\_\_\_\_