

IN THE SUPERIOR COURT FOR THE STATE OF ALASKA
AT _____

In the Matter of: _____)

A minor under 18 years of age _____)

Date of birth: _____)

CASE NO. _____ DL

REQUEST FOR RELIEF: _____

The Division of Juvenile Justice at the Depart. of Health and Social Services requests the following :

This request is supported by the attached *Affidavit and Memorandum*.

- The minor opposes this request.
 The minor does not oppose this request.

(date)

Probation Officer

Approved by _____
Probation Supervisor

I certify that on _____

a copy of this document was sent to:

- DA Parent or Guardian
 Minor's Attorney Other: _____

By: _____

ORDER

The above *Request for Relief* is granted denied.

It is further ordered that _____

Effective Date

 Superior Court Judge Master

I certify that on _____

a copy of this order was sent to:

- DA IO/PO/Placement Facility Minor's Attorney Parent or Guardian Other: _____

Clerk: _____