

IN THE INTEREST OF

Case No. _____

**COMPLAINT TO
INTERVENE (SIBLING)**

_____,
(First & last name of sibling in foster care) A Juvenile.

COMES NOW _____, sibling of the minor child

(Your first and last name)

involved in this case, and asks this Court for an Order allowing me to intervene in
this case for (check all that apply):

joint-sibling placement

sibling visitation

on-going interaction with sibling pursuant to [Neb. Rev. Stat. § 43-1311.02\(9\)](#).

In support of this Complaint to Intervene, I state and allege the following:

1. The Foster Care Review Act (the “Act”) defines “sibling” as “biological siblings and legal siblings, including, but not limited to, half-siblings and stepsiblings.”
2. The Act clarifies that this definition includes individuals who would have been considered a sibling but there has been a termination of parental rights or another disruption of parental rights, such as death of a parent.
3. The minor child involved in this case and I are siblings within the meaning of the Act, as they are:

biological siblings (full sibling, half-sibling)

legal siblings (stepsibling, sibling by adoption)

Other: _____

4. I, as the sibling of the child involved in this foster care case, have an interest in this case.

5. Check all that apply:

The State of Nebraska has filed a petition alleging that the child involved in this case comes within the meaning of [Neb. Rev. Stat. § 43-247\(3\)\(a\)](#) (meaning the child involved in this case has a abuse/neglect case).

The above described matter is pending before this Court.

The child involved in this case has been in the temporary care, custody, and control of the Nebraska Department of Health and Human Services (the “Department”) since the beginning of this case.

This Court has adjudicated the child involved in this case pursuant to [Neb. Rev. Stat. § 43-247\(3\)\(a\)](#).

Other: _____

6. The Act directs that reasonable efforts must be made to place siblings in the same foster care or adoptive placement, even if the siblings had no preexisting relationship, unless the Department can show joint-placement is contrary to the safety or well-being of any of the siblings.

7. If joint-sibling placement is not available, the Act directs the Department to make reasonable efforts to provide for frequent sibling visitation or on-going interaction between siblings, unless it can show frequent visitation or on-going interactions would be contrary to the safety or well-being of any of the siblings.

8. The Act gives siblings of a child under the jurisdiction of this Court the right to intervene for joint-sibling placement, sibling visitation, or ongoing interaction with their sibling.

9. The best interests of my sibling, the child involved in this case would be served by making me a party to this matter so that my sibling and I can maintain a good and consistent relationship.

For the reasons stated above, I move to intervene as a party in this matter for
(Check all that apply):

- joint-sibling placement
- sibling visitation
- on-going interaction with sibling

I respectfully ask this Court to enter an Order setting a hearing date for this Complaint as determined by this Court; an Order granting relief as set forth above, and for such other relief as the Court deems just and proper in the premises.

Signature: _____ Date: _____

Printed Name: _____

Street Address/P.O. Box: _____

City/State/ZIP Code: _____

Telephone Number: _____

*Email address: _____

*[Nebraska Supreme Court Rule § 2-208](#) requires individuals who are not attorneys and representing themselves to provide their email address. The court will use the email address to send notices from the court about this case **except** for items that require another type of service as directed by statute or Nebraska Supreme Court Rule.

If you no longer have email capability or if your email or other contact information changes, you must complete a [Change of Contact Information Form](#).

By checking this box, I am letting the court know that I do not have the ability to receive emails. The reason I cannot receive email is: _____

If completed by an attorney: Bar Number: _____
