

Best Interest Factors

Permanent
Custody

Factor	Facts/Observations
<input type="checkbox"/> Wishes of the Child	
<input type="checkbox"/> Child's Interactions and Interrelationships with parents, siblings, relatives, foster caregivers/out-of-home providers and any other persons who may significantly affect the child	Mother
	Father
	Current Foster Parent/Caregiver
	Siblings
	Relatives
	Other



Factor	Facts/Observations
<input type="checkbox"/> Custodial History (including if the child has been in the temporary custody of any agency for 12 of 22 months)	
<input type="checkbox"/> Need for a legally secure placement	
<input type="checkbox"/> Parent/Legal Custodian convicted of ORC §§2903.01-2903.03 and victim was a sibling of the child or another child living in the parent's household at the time, or of conspiracy, complicity of attempting to commit these offenses	
<input type="checkbox"/> Parent/Legal Custodian convicted of ORC §§2903.11-2903.13 and victim was the child, a sibling of the child or another child living in the parent's household at the time	
<input type="checkbox"/> Parent/Legal Custodian convicted of ORC §§2919.22 and victim was the child, a sibling of the child or another child living in the parent's household at the time	
<input type="checkbox"/> Parent/Legal Custodian convicted of ORC §§2907.02-2907.06 and victim was the child, a sibling of the child or another child living in the parent's household or of conspiracy, complicity of attempting to commit these offenses	
<input type="checkbox"/> Parent/Legal Custodian convicted of ORC §§2905-32, 2907.21 or 2907.22 and victim was the child, a sibling of the child or another child living in the parent's household or of conspiracy, complicity of attempting to commit these offenses.	

Factor	Facts/Observations
<input type="checkbox"/> Parent/Custodian repeatedly withheld medical treatment or food from the child when the parent/custodian has the means or withheld medical treatment not as tenets of a recognized religious body.	
<input type="checkbox"/> Parent/Custodian placed the child at substantial risk of harm two or more times due to alcohol or drug abuse and has rejected or refused participation in treatment two or more times after treatment was made a part of a journalized case plan	
<input type="checkbox"/> Parent/Custodian has abandoned the child	
<input type="checkbox"/> Parent/Custodian has had parental rights previously terminated and cannot provide this child with a legal secure permanent placement and adequately care for the child's health, welfare and safety.	
<input type="checkbox"/> Other Relevant Factor	
<input type="checkbox"/> Other Relevant Factor	
<input type="checkbox"/> Other Relevant Factor	