

STATE OF ILLINOIS }
COUNTY OF COOK } ss:

☐ 4351

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS
DEPARTMENT OF JUVENILE JUSTICE AND CHILD PROTECTION
CHILD PROTECTION DIVISION

IN THE INTEREST OF:

_____ }
Minor(s) } No. _____

ORDER
FOR RELEASE OF MENTAL HEALTH RECORDS

THIS MATTER COMING on to be heard before the Honorable _____,
the parties being present and/or represented by counsel, and the Court being fully advised in the premises, and
pursuant to the Mental Health and Developmental Disabilities Confidentiality Act, 740 ILCS 110/4 (a) (5) and
110/10 (d);

IT IS HEREBY ORDERED THAT:

_____ shall release to the Offices of the
Cook County Public Guardian (2245 West Ogden Avenue, Chicago, IL 60612),
the Cook County State's Attorney (2245 West Ogden Avenue, Chicago, IL 60612) and _____
_____, certified and delegated copies of all records relating to _____
_____, (date of birth) ____/____/____, including but not limited to records
of the psychiatric and/or psychological hospitalization, evaluation and/or treatment.

ENTERED:

Dated: _____, _____ Judge Judge's No.

Atty. No.: _____

Name: _____

Atty. for: _____

Address: _____

City/State/Zip: _____

Telephone: _____