## FORM 42

## [Rules 69 (D) (4)]

## **OVERNIGHT PROTECTIVE STAY**

Whereas (name of the child)	has this day been
apprehended/ found to be in need of overnight	t protective stay at the (Name of the
Institution).	
The said child has been produced by	(Name of the child welfare
police officer, fromPolice station	,). The child has been
brought along with the required application se	eking protective stay, medical report
stating the general health condition of the child	which has been duly perused by the
person in-charge of the Institution.	
The said child has been brought to the Ins	stitution at(time) and shall
be handed over on the following day to the con	cerned jurisdiction of the child welfare
police officer on or before(mention	time).
The personal belongings of the child have	ve been thoroughly searched and the
following articles	(if any) have been handed
over to the concerned child welfare police officer.	
In case the concerned child welfare police	ce officer fails to report in due time to
take custody of the child, such child shall be	produced before the Juvenile Justice
Board/ Child Welfare Committee by the Officer in	charge of the Institution at the earliest.
Copy to:	
1. Child Welfare Police Officer	
2. Board / Committee	
3. The Person in charge of the Institution	
Dated thisday of20	
(Signature)	(Signature)
The Person-in-charge of the Institution	Child Welfare Police Officer