PETITION FOR APPOINTMENT OF GUARDIAN OF A MINOR

Case Number:

IN THE MATTER OF:

(MINOR'S FULL NAME)

1.	I,		, am interested in the welfare of the minor
	(Your Name)		
	and make this petition as _		
	1 –	(State Interest/Relationship)	

- 2. The minor's date of Birth is ______, and resides within the Saginaw Chippewa Jurisdiction at _____
- 3. Said minor is is not a member/eligible for membership in the Saginaw Chippewa Indian Tribe.

Relatives of the minor are:

RELATIONSHIP	NAME/AGE	ADDRESS
MOTHER		
FATHER		

4. Is the Family Independence Agency, Social Services, Friend of the Court, or any other Court involved with this family in regards to this child? If so, you must indicate when and where.

When:	
Where:	

- 5. The minor child is subject to the continuing jurisdiction of another court (indicate court name and address)
- 6. The minor child is in need of a guardian because:
 - a. The parental rights of both parents or of the surviving parent have been terminated or suspended bv:

Death	a prior court order in
	(Court Name)
Disappearance	Confinement in a place of detention
Other (explain)	

	b.	It is necessary for the immediate physical well-being of the minor because:		
7.	I reque	st that	, whose address is	
		(Name of person requesting guardians		
8.		re that this petition has been examin edge, information and belief.	ed by me and its contents are true to the best of my	
Date			Date	
Petitioner Signature			Petitioner Signature	
Address			Address	
City, State, Zip Code		p Code	City, State, Zip Code	
	-•	-••••	- — - • - — — - • - — — - • - — • - — - • - — - •	
			, am 14 years of age or older and nominate	
			who lives at	
			as my guardian.	
Date			Signature of minor	

A copy of this petition shall be provided to Anishnaabeg Child and Family Services who shall perform a home study and shall submit a written report to the Court prior to initial hearing.