Saginaw Chippewa Indian Tribe Tribal Court 6954 E. Broadway Mt. Pleasant, MI 48858 989-775-4800	**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 _____.
(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 by:
      ☐ Death   ☐ a prior court order in _____
(Court Name)

      ☐ Disappearance   ☐ Confinement in a place of detention

      ☐ Other (explain) _____

   <u>OR</u>

b. It is necessary for the immediate physical well-being of the minor because:

_____

_____

_____

_____

_____

7. I request that _____, whose address is _____
   (Name of person requesting guardianship)

_____ be appointed guardian of the minor.

8. I declare that this petition has been examined by me and its contents are true to the best of my knowledge, information and belief.

_____   _____
Date   Date

_____   _____
Petitioner Signature   Petitioner Signature

_____   _____
Address   Address

_____   _____
City, State, Zip Code   City, State, Zip Code

-–+–-–+–-–+–-–+–-–+–-–+–-–+–-–+–-–+–-–+–-–+–-

9. I, _____, 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.