

<b>SAGINAW CHIPPEWA INDIAN TRIBE TRIBAL COURT CIVIL DIVISION</b>	<b>PETITION FOR GRANDPARENT AND EXTENDED FAMILY VISITATION</b>	<b>Case No.</b>
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6954 East Broadway, Mount Pleasant MI 48858

(989) 775-4800

Petitioner Name		Respondent Name (Mother)		Respondent Name (Father)	
Petitioner's Name before Marriage		Respondent's Name before Marriage		Respondent's Name before Marriage	
Petitioner's Address		Respondent's Address		Respondent's Address	
Petitioner's Telephone # Email address:	Petitioner's Driver's License#	Respondent's Telephone # Email Address:	Respondent's Driver's License #	Respondent's Telephone # Email Address:	Respondent's Driver's License #
Petitioner's Tribal Affiliation Membership #	Petitioner Date of Birth	Respondent's Tribal Affiliation Membership #	Respondent Date of Birth	Respondent's Tribal Affiliation Membership #	Respondent Date of Birth

1. The Petitioner ☐ is/are ☐ is not a member of Saginaw Chippewa Indian Tribe.
2. The Child(ren) ☐ is/are ☐ is not a member of Saginaw Chippewa Indian Tribe.
3. ☐ The Petitioner has resided on the Isabella or Saganing Indian Reservation for a period of at least 180 days immediately before the filing of this action.
4. ☐ The Child(ren) has resided on the Isabella or Saganing Indian Reservation for a period of at least 180 days immediately before the filing of this action.
5. Complete names, tribal affiliation/membership and dates of birth of children under 18 that you wish to be considered in your petition.

Child's Name	Date of Birth	Address of Residence	Tribal Affiliation

6. There ☐ are ☐ are not any pending court procedures in other jurisdictions that could affect the minor child/ren. If so, please state the court name, address and type of proceeding(s) and attach any current court orders.
7. There ☐ are ☐ are not any pending ACFS, MDHHS, or CPS proceedings regarding the listed children. If so, please state the case status, agency and contact information.

8. Custody: (☒ all that apply)

The child(ren) have been living with \_\_\_\_\_ at \_\_\_\_\_ since \_\_\_\_\_.

9. Petitioner ☐ is listed on any central registration. ☐ Petitioner is not listed on any central register.

10. ☐ Is the person(s) domiciled with the petitioner ☐ is listed ☐ is not listed on the Tribe's central registry.

11. ☐ Petitioner and/or Person(s) domiciled with petitioner ☐ has ☐ has not been convicted of domestic abuse felony conviction in any jurisdiction.

12. Petitioner and/or Person(s) domiciled with the petitioner was convicted of any of the following felonies:

☐ murder ☐ child abuse ☐ sexual assault ☐ domestic violence ☐ kidnapping ☐ aggravated assault  
☐ stalking ☐ or any felony related to violence or abuse ☐ None

13. Petitioner and/or Person(s) domiciled with the petitioner was convicted of:

☐ child pornography ☐ pedophilia ☐ none or related conviction(s).

14. Petitioner and/or Person(s) domiciled with the petitioner was convicted of:

☐ drug abuse and/ or ☐ alcoholism related problems as proven by sufficient evidence submitted to the children's court.

15. ☐ Petitioner or persons domiciled with the petitioner was convicted of any felony in any jurisdiction, excludes felonies listed and the date of completion of probation or parole for said conviction occurred within 10 years from the date the petition was filed.

16. ☐ Any other finding by the children's court that the requested visitation it is not in the best interests of the child(ren).

17. Grand Parenting Time: (☒ all that apply)

☐ Proper cause to establish and/or add/change grand parenting visitation time with child(ren) exist as follows:  
(Use separate sheet of paper to explain in detail, including all necessary facts)

☐ It is in the best interest of the child(ren) to establish or add/change grand parenting time for the following reason: (Use separate sheet of paper to explain in detail, including all necessary facts)

☐ \_\_\_\_\_ and I agree to grand parenting time as follows:  
(Use separate sheet of paper to explain what you are requesting the court to order)

**I declare that under penalty of perjury, pursuant to Tribal Code section 1.2038, the statements are true to the best of my knowledge, information and belief. (Do not sign until a notary verifies signature)**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

Subscribed and sworn to me before on \_\_\_\_\_, \_\_\_\_\_ County, Michigan.  
Date

My commission expires: \_\_\_\_\_ Signature: \_\_\_\_\_

Notary public, State of Michigan, County of \_\_\_\_\_