



SAULT STE. MARIE CHIPPEWA TRIBAL COURT

IN THE MATTER OF:

DOB: ___/___/___

GM-___-___

PETITION FOR GUARDIANSHIP OF MINOR

1. I, _____, reside at _____, _____, _____, _____,
Your Name *Address* *City* *State*
and am interested in the welfare of the minor and make this petition as _____.
Relationship to Child

2. The proposed guardian is: a member of the Sault Tribe *(include a copy of your Tribal enrollment card)*
 a member of another Tribe *(include a copy of your Tribal enrollment card)*
 am not a tribal member.

3. The minor was born on _____ in _____,
Date of Birth *City or County* *State*
is Female Male,
is unmarried, and resides at _____.
Address *City* *State* *Zip*
This address is is not within the jurisdiction of the Sault Ste. Marie Tribe of Chippewa Indians.

4. The minor is a member of a federally recognized Indian tribe. *(include a copy of Tribal enrollment card)*

5. The names and addresses of other persons known to the petitioner to have an interest in the proceedings are as follows:

Mother's name: _____

Father's Name: _____

Address: _____

Address: _____

Guardian/ Custodian Name: _____

Other: _____

Address: _____

Address: _____

relationship to minor: _____

Other: _____

Other: _____

Address: _____

Address: _____

relationship to minor: _____

relationship to minor: _____

6. A guardianship, child welfare, or custody action involving the minor child was previously filed in _____ Court on _____ and remains pending is closed.
Tribe/County *Date*

7. The minor named above is in need of a guardian because:

- a. parental rights of both parents or of the surviving parent have been
 - terminated suspended by
 - prior court order. judgment of divorce/separate maintenance.
 - death. judicial determination of mental incompetence.
 - disappearance/abandonment. confinement in a place of detention.
- or** b. the appointment is necessary for the immediate physical well-being of the child
- or** c. the parent(s) consent to the proposed guardianship, as evidenced by their signature(s) below.

8. The facts upon which the petitioner bases the request for appointment of a guardian are as follows:

9. An emergency/temporary guardianship for the minor is necessary until a hearing can be held on this Petition because an immediate need exists and the appointment of a temporary guardian is in the best interest of the minor as follows: _____

10. I nominate _____, who resides at, _____
Name *Street Address*
_____ to be appointed as Guardian.
City *State* *Zip*

11. The proposed ward's assets, liabilities, amount and sources of income are estimated to be:

Real and Personal Property:	Value:
_____	\$ _____
_____	\$ _____
_____	\$ _____

Income and Source:

Amount:

\$ _____
\$ _____
\$ _____

I hereby verify under penalty of perjury that the information contained in this petition is true and correct to the best of my knowledge, information and belief.

Signature of Petitioner: _____ Date: _____

Signature of Proposed Guardian, *if not petitioner*: _____ Date: _____

Signature of Parent, *if applicable*: _____ Date: _____

Signature of Parent, *if applicable*: _____ Date: _____

STATE OF MICHIGAN

COUNTY OF _____ } SS.

The foregoing instrument was acknowledged before me this _____ day of _____ 20____, by

_____.

**, Notary Public,
_____ County, Michigan
Acting in _____ County
My commission expires: _____