STATE OF NORTH DAKOTA	IN JUVENILE COURT
COUNTY OF	JUDICIAL DISTRICT
IN THE INTEREST OF	, DOB, A CHILD.
) Case No
PETITIONER(S),)
(child)(mother)(father)) PETITION FOR GUARDIANSHIP (Written Consent of Parents)))
RESPONDENTS.)
TO THE ABOVE-NAMED JUVENILE COURT:	
Your Petitioner(s),	
(full name(s)), respectfully requests appointment of	of a guardian for the above-named child with
the effect of the appointment to be as provided un	nder Section 27-20.1-13 of the North Dakota
Century Code (N.D.C.C.). Further, I/we state to the	e court:
Jurisdiction and Venue:	
1. This court has jurisdiction under N.D.C.C. Se	ection 27-20.1-02; and this is the proper
venue because the child resides in	County and is not alleged to
be a child in need of protection.	
Petitioner's/Co-Petitioner's Information:	
2. I am the Petitioner and I am	
(relationship) of the above-named child.	
I reside at:	
(Address)	
(City, County, State, Zip Code)	
My telephone number is:	

27-20.1 Parental Consent Form: JCG WCP 1

((Choose if a co-petitioner and complete the following information.)
	I am the Co-Petitioner and I am the
(rela	tionship) of the above-named child.
	I reside at:
	(Address)
	(City, County, State, Zip Code)
	My telephone number is:
3.	I/We (choose one) have or have not participated, as a party, a witness, or in any
othe	r capacity, in any other proceeding concerning the custody of or visitation with the child. If
so, ic	dentify the court, the case number, and the date of the child custody determination.
4.	I/We (<i>choose one</i>) know or do not know of any proceeding that could affect the
curre	ent proceeding, including proceedings for child support enforcement and proceedings
relat	ing to domestic violence protective orders, termination of parental rights, and adoptions. If
so, ic	dentify the court, the case number, and the nature of the proceeding.
Child	l's Information:
5.	The child's full legal name is
	The child currently resides at:
	(Address)
	(City, County, State, Zip Code)
	The child's telephone number is:

27-20.1 Parental Consent Form: JCG WCP 1

6.	The child (choose one) is is not currently under the care, custody or control of a
pers	son or entity. If a person or entity currently has care, custody or control of the child:
	Name of Person or Entity:
	Address:
	City, State, Zip Code:
	Telephone number(s):
7.	The child's birthdate is and the child is currently years of
age.	A certified copy of the child's birth certificate (choose one):
u is	s available and accompanies this petition.
☐ i	s not available to accompany this petition for the following reasons (provide explanation
shov	wing good cause as to why a certified copy of the child's birth certificate isn't available to file
with	the petition):
8.	The child (choose one):
☐ is	s an Indian Child, as defined by the Indian Child Welfare Act.
	List child's tribe(s))
LJ is	s not an Indian Child, as defined by the Indian Child Welfare Act.
☐ r	may be an Indian Child, as defined by the Indian Child Welfare Act.
(List child's possible tribe(s))
☐ F	Petitioner does not have enough information to state if the Indian Child Welfare Act applies
	to the child.

The Mother's Information: The child's mother is (full name) _____ 9. whose last known address and telephone number are: Address: City, State, Zip Code: ______ Telephone number(s): If the last known address and phone number of the mother are not known, provide detailed information describing the efforts made to locate her: 10. The child's mother consents to this guardianship (*choose one*): ☐ The mother consents in writing to this guardianship and submits an affidavit indicating her consent and any limitations on the guardian's powers and duties under Section 27-20.1-15 of the North Dakota Century Code (N.D.C.C.). The mother's affidavit of consent accompanies this petition. ☐ The mother is not required to give consent because she is deceased. A copy of the mother's death certificate accompanies this petition. The mother is not required to give consent because her parental rights over the child are terminated by court order. A certified copy of the court order terminating the mother's parental rights accompanies this petition. The Father's Information: ☐ There is more than one alleged or presumed father. A completed Exhibit A: Additional Alleged or Presumed Fathers form is attached. (Choose if applicable. Use Paragraphs 11 and

12 to complete the information for the first alleged or presumed father. For additional

fathers, complete an Exhibit A: Additional Alleged or Presumed Fathers form.)

11.	The child 's father is (<i>choose one</i>) □ known to be , □ alleged to be , or □ presumed to
be (fu	ll name)
whose	e last known phone number and address are:
	Address:
	City, State, Zip Code:
	Telephone number(s):
If the	last known address and phone number of the father are not known, provide detailed
inforn	nation describing the efforts made to locate him:
12.	The child's father consents to this guardianship (choose one):
☐ Th	e father consents in writing to this guardianship and submits an affidavit indicating his
СО	nsent and any limitations on the guardian's powers and duties under Section 27-20.1-15
of	the North Dakota Century Code (N.D.C.C.). The father's affidavit of consent accompanies
thi	is petition.
☐ Th	e father is not required to give consent because he is deceased. A copy of the father's
de	ath certificate accompanies this petition.
☐ Th	e father is not required to give consent because his parental rights over the child are
tei	rminated by court order. A certified copy of the court order terminating the father's
ра	rental rights accompanies this petition.
Other	Persons with Claims for Parental Rights, Custody or Visitation:
13.	Provide the names, last known addresses, and telephone numbers of any persons, other
than t	he petitioner or listed parties, that may have a claim for parental rights, custody, or
visitat	ion rights to the child:
(Parag	graph 13 continued on next page.)

Name of person	Last Known Addres	s	Phone Number	Type of Claim (i.e. Parental Rights, Custody, Visitation)
	onal sheets are attach			xhibit.)
Persons with whom the	Child Currently Lives	or Has Live	ed:	
14. The child current	ly lives at the address	s listed in Pa	aragraph 3 of this	petition. The names,
relationship to the child,	, and phone numbers	of the pers	ons with whom th	ne child currently lives
are as follows (list perso	ns currently living wit	h the child)	:	
Name of Person		Relations	hip to Child	Phone Number
	onal sheets are attach			xhibit.)

15. The child has lived at the following places with the following people within the last five years (*list the places the child has lived in the last five years*):

Time Period	Name of person the child	Address	Phone Number
(mo/yr - mo/yr)	lived with and relationship i.e., Jane Doe (Aunt)		
i.e., 01/2016 – 06/2017	i.e., saire boe (Adire)		
Additional sheets are attached as Exhibit (Choose if applicable and fill in letter identifying the exhibit.)			
The Child's Siblings or Half-Siblings:			
16. The child (choose one, Paragraph 16 continued on next page):			
does not have any sil	blings or half-siblings.		
has siblings or half-siblings. If the child has siblings or half-siblings, provide the names of the			
siblings or half-sibling	gs and with whom each cu	rrently lives.	
Sibling Name Polationsh	Name of person w	/ Adduss / Adduss / Adduss / A	Phono Number

Sibling Name, Relationship i.e., Jim Doe (Brother) (Half-Brother)	Name of person with whom the sibling or half-sibling lives	Address/Phone Number

Sibling Name, Relationship i.e., Jim Doe (Brother) (Half-Brother)	Name of person with whom the sibling or half-sibling lives	Address/Phone Number
_	ets are attached as Exhibiticable and fill in letter identifying	 g the exhibit.)
Proposed Guardian/Co-Guardia	n Information:	
17. I, the Petitioner/Co-Petit	ioner, seek (<i>select all that apply</i>):
appointment of myself as gua	ardian of the child. (<i>If proposed</i> <u>o</u>	guardian is the petitioner.)
appointment of myself as co- petitioner.)	guardian of the child. (If propose	ed co-guardian is the co-
18. The occupation of the pr	oposed guardian(s) is:	
19. The proposed guardian(s	s) has the following qualifications	s to serve as guardian/co-

20. The following individuals reside with or may reside with the proposed guardian/coguardian (*list spouse, parents, adult children, adult siblings and any other adult who resides with or may reside with the proposed guardian/co-guardian*):

Name	Relationship	Address	Phone Number
	Additional sheets are	attached as Exhibit	

Additional sheets are attached as Exhibit _____.

(Choose if applicable and fill in letter identifying the exhibit.)

21. The following children reside with or may reside with the proposed guardian/coguardian (list any other children who reside with or may reside with the proposed guardian/coguardian; Paragraph 21 continued on next page):

Name of Child	Relationship	Address	Phone Number

Name of Child	Relationship	Address	Phone Number
		nttached as Exhibit Indicate the description of the exhibitation of the exhibi	oit.)
The Child's Assets and A	Anticipated inco	me:	
22. The child for who	om the guardians	ship is sought has the following as	ssets and anticipated
income are (list all asset	ts and approxima	ite valuations known to the petition	oner including real
property, personal prop	erty, and income	. Attach a separate page containi	ng assets, if
necessary):			
	Asset		Value
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
☐ Additi	onal sheets are a	attached as Exhibit	

(Choose if applicable and fill in letter identifying the exhibit.)

23.	I/We believe a guardianship is in the child's best interests because (list facts establishing
why	you believe a guardianship is in the child's best interest):
,	,

24.	I/We believe it is in the child's best interests that the parents have the following
parenting time, contact and information while the guardianship is in effect:	
25.	I/We have read the powers and duties of a guardian of a child under Section 27-20.1-15
of the	e North Dakota Century Code (N.D.C.C.) and (select all that apply):
□ 1, 1	the Petitioner, am a fit and willing person to be appointed guardian.
☐ I, t	the Co-Petitioner, am a fit and willing person to be appointed co-guardian.
26.	I/We acknowledge that, by accepting the appointment, a guardian submits personally to
the ju	risdiction of the court in any proceeding relating to the guardianship that may be
institı	uted by any interested person, as is required under N.D.C.C. Section 27-20.1-14.

record investigation under N.D.C.C. Chapter 50-11.3.

27.

with the proposed guardian/co-guardian and the child, must comply with a criminal history

I/We acknowledge that the proposed guardian/co-guardian, and other adults residing

28. I/We acknowledge that any person interested in the welfare of the child who opposes

the appointment of the proposed guardian/co-guardian must file an objection to the

appointment and a demand for hearing within ten days of the service of this petition.

29. I/We acknowledge that, if no objections are filed within ten days, the court may order

the appointment of a guardian/co-guardian for the child without a hearing on review of the

guardian ad litem's report.

WHEREFORE, PETITIONER PRAYS:

30. That this Petition be ordered filed; that a Summons be issued, and that the Petition be

heard promptly;

31. That the court waive the hearing requirement because this Petition is unopposed;

32. That the court, upon clear and convincing evidence, issue Findings of Fact;

33. That the court finds that guardianship is in the best interest of the child and the public;

and

34. That the court, upon proof by clear and convincing evidence, issue an order appointing

the proposed guardian/co-guardian or other order of disposition best suited to the treatment,

rehabilitation, and welfare of the child.

NOTICE TO RESPONDENTS:

35. If the Juvenile Court waives the in-person hearing requirement, any person interested

in the welfare of the child who opposes the appointment of the proposed guardian must file

a written objection to the appointment and a demand for hearing within ten days of service

of this petition.

(Petitioner's/Co-Petitioner's verified signatures on Page 14 of 14.)

in this Petition for Guardianship is true and correct. Signed on ______ (*Date*), in ______ (*City*), ______(County), _____(State), _____(Country). Petitioner's Signature Petitioner's Printed Name Petitioner's Address Petitioner's City, State, Zip Code Telephone Number: ______ Email Address: (Complete if a co-petitioner, otherwise, leave blank.) Signed on ______ (*Date*), in _____ (*City*), _____ (County), _____ (State), _____ (Country). Co-Petitioner's Signature Co-Petitioner's Printed Name Co-Petitioner's Address Co-Petitioner's City, State, Zip Code Telephone Number: Email Address:

I verify, under penalty of perjury under the law of North Dakota, that everything I stated