

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

IN THE INTEREST OF

Amended

**Petition for
Appointment of Guardian**
 Full Limited Temporary
Guardianship
(§48.9795, Wis. Stats.)
Indian Child Welfare Act

Case No. _____

I STATE ON INFORMATION AND BELIEF:

1. **Child's** Address

Child has previously been adopted? Yes No

Mother's Name and Address Mother is deceased

Mother's Date of Birth Mother's Place of Birth Mother's Tribal Affiliation:

Father's Name and Address Father is deceased

Father's Date of Birth Father's Place of Birth Father's Tribal Affiliation:

Other known information in regard to tribal affiliation or enrollment, including all potential tribes that the child/juvenile may be a member and aliases or enrollment numbers of parents, grandparents, or other direct lineal ancestors:

Current Guardian's Name and Address

Legal Custodian's Name and Address

Indian Custodian's Name and Address

Additional Interested Person(s) Name and Address

Is an interpreter needed? No Yes Language(s) _____ Party Name(s) _____

If applicable, use JN-1504 to Petition for an Emergency Guardian (§48.9795, Wis. Stats.).

If applicable, use GN-3290 to Petition for Guardianship of the Estate (Minor Guardianship).

2. The appointment of a guardian is being requested for the child. As the petitioner, I am interested as:

3. The person or agency nominated as the guardian of the child is _____.

Date of Birth: _____

Address: _____

Phone: _____

4. The person or agency nominated as the successor guardian of the child is _____.

Address: _____

Phone: _____

5. The child is subject to §48.028, Wis. Stats. or the federal Indian Child Welfare Act (25 USC 1901 to 1963).

Tribe's name and address: _____

6. Continued custody of the child by the parent or Indian custodian is is not likely to result in serious emotional or physical damage to the child. _____

7. Active efforts were were not made to prevent the breakup of the Indian child's family and those efforts have proved unsuccessful. **See attached Statement of Active Efforts (IW-1609).** _____

8. If the proposed guardianship would change the placement of the child from the home of his or her parent or Indian custodian to a placement outside the home:
 Placement has been made in accordance with the order of preference set forth in §48.028, Wis. Stats.
OR
 There is good cause to depart from the order of placement preference under §48.028, Wis. Stats.

9. I am requesting a(n):

Full guardianship

The facts and circumstances establishing that the child's parents are unfit, unwilling, or unable to provide for the care, custody, and control of the child or other compelling facts and circumstances demonstrating that a full guardianship is necessary are: _____
 See attached

Limited guardianship

The facts and circumstances establishing that the child's parents need assistance in providing for the care, custody, and control of the child and a statement of the specific duties and authority under §48.9795 (2) (d), Wis. Stats., sought by the petitioner for the proposed guardian and the specific parental rights and duties that the petitioner seeks to have transferred are: _____
 See attached

Temporary guardianship

The facts and circumstances establishing that the child's particular situation, including the inability of the child's parents to provide for the care, custody, and control of the child for a temporary period of time, requires the appointment of a temporary guardian; the reasons for the appointment of a temporary guardian; and the powers requested for the temporary guardian are: _____
 See attached

10. The facts and circumstances establishing that the proposed guardian is fit, willing, and able to serve as the child's guardian are: _____
 See attached

11. The proposed guardian must file the Statement by the Proposed Guardian (JN-1514) at least 96 hours before the hearing on the Full, Limited, or Temporary guardianship petition.

12. I request that one or both parents be ordered to pay child support in an amount to be determined by the court.

13. The child is or is not involved in another pending matter or subject to a court order under §§48.13, 48.133, or §48.14, Wis. Stats., or ch. 938, including guardianship, child in need of protection or services, unborn child in need of protection or services, juvenile in need of protection or services, delinquency, termination of parental rights, adoption, or other related proceedings.

If the child is involved, provide details regarding any other cases: _____

14. This Petition for Appointment of a Guardian is filed with a Petition for Protective Placement prior to transfer of the child directly from a hospital to a nursing facility or community-based residential facility under §50.06, Wis. Stats.

15. A Petition for Minor Guardianship of the Estate has been or will be filed separately.
 I request to consolidate the Minor Guardianship of the Child and Minor Guardianship of the Estate cases, subject to court approval.

16. The Uniform Child Custody Jurisdiction and Enforcement Act Declaration (GF-150) form is attached to this Petition.

I request that [Name] _____ be appointed guardian of the child.

I shall provide notice of the hearing and a copy of this petition as follows:

- o To the Indian child, Indian child's parents, Indian custodian, and Indian tribe at least 10 days before the date of the hearing. If the identity or location of the Indian child's parent, Indian custodian, or tribe cannot be determined, notice shall be provided at least 15 days before the date of the hearing to the U.S. Secretary of the Interior. Proof of registered mail is required.
- o To the child's guardian, legal custodian, and guardian ad litem / adversary counsel, and any other interested parties at least 7 days before the date of the hearing. Service shall be made by first class mail or by personal service.

DISTRIBUTION:

1. Court
2. Child – if 12 years or older
3. Child's Parents
4. Child's Guardian
5. Child's Legal Custodian
6. Child's Guardian ad Litem/Adversary Counsel
7. Tribe
8. Indian Custodian (if any)
9. Additional Interested Persons (if any)

	
Petitioner's Signature	
Name Printed or Typed	
Address	
Email Address	Telephone Number
Date	State Bar No. (if any)