

<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<b>PETITION</b> <b>(CHILD PROTECTIVE PROCEEDINGS), PAGE 1</b> <input type="checkbox"/> Supplemental	<b>CASE NO.</b> <b>PETITION NO.</b>
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**Court address** **Court telephone no.**

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**1. In the matter of** (State the name, county of legal residence, race, sex, and date and place of birth of each child, and indicate with whom the child lives.)

a. Name of child and county of legal residence	Race	Sex	Date and place of birth	Living with: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other
b. Name of child and county of legal residence	Race	Sex	Date and place of birth	Living with: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other
c. Name of child and county of legal residence	Race	Sex	Date and place of birth	Living with: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other
d. Name of child and county of legal residence	Race	Sex	Date and place of birth	Living with: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other
e. Name of child and county of legal residence	Race	Sex	Date and place of birth	Living with: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other
f. Name of child and county of legal residence	Race	Sex	Date and place of birth	Living with: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other
g. Name of child and county of legal residence	Race	Sex	Date and place of birth	Living with: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other
h. Name of child and county of legal residence	Race	Sex	Date and place of birth	Living with: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other

**2. The names and addresses and other relevant information of the parents, guardian, legal custodian, or nearest known relative are as follows:** If the father/mother/guardian or legal custodian is a respondent, place a check mark in the column R. Name each father's children and indicate for which child the father is a legal father by placing (LF) after the name of each child. If there is no (LF) designation, the father is presumed to be the putative father of the named child. For example: John Doe (LF), Mary Doe, Susan Doe (LF).

a. Father's name	R	DOB	Address	Telephone no.
Name(s) of child(ren)				
b. Father's name	R	DOB	Address	Telephone no.
Name(s) of child(ren)				
c. Father's name	R	DOB	Address	Telephone no.
Name(s) of child(ren)				
d. Father's name	R	DOB	Address	Telephone no.
Name(s) of child(ren)				
e. Father's name	R	DOB	Address	Telephone no.
Name(s) of child(ren)				
f. Father's name	R	DOB	Address	Telephone no.
Name(s) of child(ren)				
g. Mother's name	R	DOB	Address	Telephone no.
h. Mother's name	R	DOB	Address	Telephone no.
i. Nonparent adult respondent's name		DOB	Address	Telephone no.
j. Guardian/Legal custodian's name	R	DOB	Address	Telephone no.

(SEE SECOND PAGE)

<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<b>PETITION</b> <b>(CHILD PROTECTIVE PROCEEDINGS), PAGE 2</b> <input type="checkbox"/> Supplemental	<b>CASE NO.</b> <b>PETITION NO.</b>
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Court address

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In the matter of

3.  a. There is no other pending or resolved action within the jurisdiction of the family division of the circuit court involving the family or family members of the minor.
- b. An action within the jurisdiction of the family division of circuit court involving the family or family members of the minor has been previously filed in \_\_\_\_\_ Court, Case Number \_\_\_\_\_, was assigned to Judge \_\_\_\_\_, and  remains  is no longer pending.

4. The named child(ren) come within the provisions of MCL 712A.2(b)(1)-(5) as follows (check all that apply): (See page 3 for specific allegations.)

- \_\_\_\_\_ is a/are member(s) of or eligible for membership in the \_\_\_\_\_ Indian tribe.  Removal is requested below and attached are details describing the active efforts made to provide remedial services and rehabilitative programs designed to prevent the breakup of the Indian family and documentation and attempts to identify the child's tribe.
- A military/nonmilitary affidavit is attached.
- The parent or other person legally responsible for the care and maintenance of the child(ren), when able to do so, neglected or refused to provide proper or necessary support, education, medical, surgical, or other care necessary for the child(ren)'s health or morals, or he/she has subjected the child(ren) to a substantial risk of harm to his or her mental well-being, or he/she has abandoned the child(ren) without proper custody or guardianship.
- The home or environment, by reason of neglect, cruelty, drunkenness, criminality, or depravity on the part of the parent, guardian, nonparent adult, or other custodian, is an unfit place for the child(ren) to live.
- The parent has substantially failed, without good cause, to comply with a limited guardianship placement plan for the child(ren) pursuant to MCL 700.5205.
- The parent has substantially failed, without good cause, to comply with a court-structured plan for the child(ren) pursuant to MCL 700.5207 and 700.5209.
- The child(ren) has/have a guardian pursuant to the estates and protected individuals code and the parent meets both of the following criteria: (i) the parent, having the ability to support or assist in supporting the child(ren), has failed or neglected, without good cause, to provide regular and substantial support for two years or more before the filing of the petition or, if a support order has been entered, has failed to substantially comply with the order for two years or more before the filing of the petition, and (ii) the parent, having the ability to visit, contact, or communicate with the child(ren), has regularly and substantially failed or neglected, without good cause, to do so for two years or more before the filing of the petition.

5. The reason(s) why it is contrary to the welfare of the child(ren) for the child(ren) to remain in the home are: (Attach separate sheets as needed.)

6. The reasonable effort(s) made to prevent the removal of the child(ren) include: (Attach separate sheets as needed.)

(SEE THIRD PAGE)

<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<b>PETITION</b> <b>(CHILD PROTECTIVE PROCEEDINGS), PAGE 3</b> <input type="checkbox"/> Supplemental	<b>CASE NO.</b> <b>PETITION NO.</b>
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In the matter of

7. The specific allegations are: (Attach separate sheets as needed.)

8. I request the court to

- a. refer the matter to alternative services.
- b. authorize this petition and take jurisdiction over the child(ren). Further, I request the court to
  - issue an order removing  the child(ren)  the abuser from the home.
- c. terminate parental rights of father to child(ren)  1.a.  1.b.  1.c.  1.d.  1.e.  1.f.  1.g.  1.h.
- d. terminate parental rights of mother to child(ren)  1.a.  1.b.  1.c.  1.d.  1.e.  1.f.  1.g.  1.h.

I declare that the statements in this petition are true to the best of my information, knowledge, and belief.

\_\_\_\_\_  
 Petitioner's signature Date Agency/Address

\_\_\_\_\_  
 Print or type name City, state, and zip Telephone no.

Approved by: \_\_\_\_\_  
 Prosecutor's signature (optional) and date

9. A preliminary inquiry and/or hearing has been conducted and the filing of this petition
- on  the child(ren)  the following child(ren) \_\_\_\_\_  is authorized.
  - on  the child(ren)  the following child(ren) \_\_\_\_\_  is not authorized.

\_\_\_\_\_  
 Date Judge/Referee Bar no.