

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

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

2. The child(ren) named above come(s) within the provisions of MCL 712A.2. See attached sheet for allegations.

Member of or eligible for membership in American Indian Tribe or Band as stated in allegations.

3. 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 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. Indicate for which child[ren] the father is a legal or putative father by placing the corresponding numbers 1a, 1b, 1c, etc. in the column LF C# or column PF C#.)

a. Father's name	R	DOB	LFC#	PFC#	Address	Telephone no.
b. Father's name	R	DOB	LFC#	PFC#	Address	Telephone no.
c. Father's name	R	DOB	LFC#	PFC#	Address	Telephone no.
d. Father's name	R	DOB	LFC#	PFC#	Address	Telephone no.
Mother's name	R	DOB	Address			Telephone no.
Guardian's/Legal custodian's name	R	DOB	Address			Telephone no.
Nearest known relative's name		DOB	Address			Telephone no.
Nonparent adult respondent's name		DOB	Address			Telephone no.

5. 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 mother. parental rights of father 4a. 4b. 4c. 4d.

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)

6. 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.