MENOMINEE INDIAN TRIBE OF WISCONSIN	MENOMINEE TRIBAL COURT
IN THE INTEREST OF Name Date of Birth	**Petition to Vacate Consent Decree and Waiver of Hearing** Case No.

PETITION TO VACATE CONSENT DECREE

I STATE ON INFORMATION AND BELIEF THE FOLLOWING IS TRUE:

1.

Child's/Juvenile's Street and City Address	
Parent 1's Name and Address	
Parent 2's Name and Address	
Guardian's, Legal Custodian's Name and Address	

2. A consent decree was ordered by the court on [Date]

3. The consent decree is scheduled to expire on [Date]

4. The consent decree should be vacated:

5. The parties ☐ will ☐ will not waive their rights to a hearing and agree that the proceedings shall be reinstated

Petitioner

Name Printed or Typed

Address

Email Address | Telephone Number

Date | State Bar No. (if any)

WAIVER OF HEARING

The following parties stipulate and agree that the court may enter an order vacating the consent decree and reinstate the proceedings.

Child/Juvenile

Name Printed or Typed

Address

Email Address | Telephone Number

Date | State Bar No. (if any)

Child's/Juvenile's Attorney/GAL

Name Printed or Typed

Address

Email Address | Telephone Number

Date | State Bar No. (if any)

Parent 1

Name Printed or Typed

Address

Email Address | Telephone Number

Date | State Bar No. (if any)

Parent 2

Name Printed or Typed

Address

Email Address | Telephone Number

Date | State Bar No. (if any)

Indian Custodian

Name Printed or Typed

Address

Email Address | Telephone Number

Date | State Bar No. (if any)

Case worker

Name Printed or Typed

Address

Email Address | Telephone Number

Date | State Bar No. (if any)

Prosecuting Attorney

Name Printed or Typed

Address

Email Address | Telephone Number

Date | State Bar No. (if any)