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| **MENOMINEE INDIAN TRIBE OF WISCON MENOMINEE TRIBAL COURT** |
|   |
| IN THE INTEREST OF      Name      Date of Birth | Petition for Adoptive PlacementCase No.        |
|  |
| UNDER OATH, I STATE: |
|  1. | [ ]  A. The child was born on the date indicated above and resides at                                . |
|  | [ ]  B. The child is due to be born about                                                              . |
|  2. | The birth mother                                                             , age                 , |
|  | resides at                                                                                       . |
|  |  |
|  3. | The birth father                                                             , age                 , |
|  | resides at                                                                                       . |
|  |  |
|  4. | The proposed adoptive Parent 1                                              , age                 , |
|  | resides at                                                                                       . |
|  5. | The proposed adoptive Parent 2                                              , age                 ,resides at                                                                                       |
|  |  |
|  6. | [Person/agency]                                               arranged placement of the child. |
|  |  |
|  7. | The report of financial, medical and legal arrangements is attached. |
|  |   |
|  8. | The placement is in a licensed foster home.  |
|  9. | The Petition for Suspension or Termination of Parental Rights accompanies this Petition. |
| **[ ]**  10. | The child is an Indian Child, |
|  |  | 1. Indian tribe’s name and address: [ ]  Menominee [ ]  Other:
2. Indian custodian’s name and address:

[ ]  placement has been made in accordance with the order of preference set forth in §278-121. |
|  |  | [ ]  there is good cause based on the child’s best interest to depart from the order of placement preference:                                                                                                                                                                       . |
| State of                                     | ▶ |
| County of                                | Petitioner’s Signature |
| Subscribed and sworn to before me on            |       |
|      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Name Printed or Typed |
| Notary Public/Court Official  |       |
|      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Address |
| Name Printed or Typed |             |
| My commission/term expires:      \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Email Address Telephone Number |
|  |             |
|  | Date State Bar No. (if any) |
|  |  |
|  | ▶ |
|  | Petitioner’s Signature |
|  |       |
|  | Name Printed or Typed |
|  |       |
|  | Address |
|  |             |
|  | Email Address Telephone Number |
|  |             |
|  | Date State Bar No. (if any) |
|  |  |
| Distribution:1. Court2. Parties3. Tribe (if any) |