

IN THE INTEREST OF

Amended

Name

Petition under Chapter 278

Date of Birth

Juvenile Protection and Services

Delinquency

Case No. _____

I STATE ON INFORMATION AND BELIEF THAT THE FOLLOWING IS TRUE: (if unknown or cannot be ascertained, so state)

1.

Petitioner's Name and Address			Petitioner's Attorney's Name and Address					
Child/Juv DOB	Child/Juv's Place of Birth	Child/Juv's Tribal Affiliation	Sex <input type="checkbox"/> Female <input type="checkbox"/> Male	Race	Height	Weight	Hair Color	Eye Color
Child's Street and City Address								
Child/Juvenile has previously been adopted? <input type="checkbox"/> Yes <input type="checkbox"/> No								
Mother's Name and Address				Mother's Date of Birth	Mother's Place of Birth	Mother's Tribal Affiliation <input type="checkbox"/> Enrolled Menominee <input type="checkbox"/> Menominee Descendant <input type="checkbox"/> Other		
Father's Name and Address <input type="checkbox"/> See attached for additional parties.				Father's Date of Birth	Father's Place of Birth	Father's Tribal Affiliation <input type="checkbox"/> Enrolled Menominee <input type="checkbox"/> Menominee Descendant <input type="checkbox"/> Other		
Legal Status: <input type="checkbox"/> Birth <input type="checkbox"/> Adjudicated/Adoptive <input type="checkbox"/> Presumed <input type="checkbox"/> Alleged <input type="checkbox"/> Unknown								
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:								
<input type="checkbox"/> Guardian <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Indian Custodian <input type="checkbox"/> Foster Parent <input type="checkbox"/> Spouse, if any. <input type="checkbox"/> If none of preceding, nearest relative.								
[Name] [Address]								
Name and Address of School Enrolled								
Child/Juvenile in temporary physical custody? <input type="checkbox"/> No <input type="checkbox"/> Yes Date: _____ Time: _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. Where held: _____ <input type="checkbox"/> Not disclosed—threat of imminent danger to child-physical custodian.								

2. The child is non-Indian; Indian (Menominee); or is Indian (Non-Menominee) and subject to § 278-13 Indian tribe's name and address: _____

3. Under section(s): _____, the child/juvenile is
 in need of protection and services
 delinquent
 because: _____

See attached

4. The child is placed out of the home.

A. 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.

B. Active efforts were were not made to provide remedial services and rehabilitation programs designed to prevent the breakup of the Indian family. See attached Statement of Active Efforts (CU-1000)

C. Placement in the home at this time is is not contrary to the child's welfare.

D. Reasonable efforts to prevent removal were [Complete one of the following]
 made by the department or agency responsible for providing services as follows:

 made by the department or agency responsible for providing services, although an emergency situation resulted in immediate removal of the child from the home as follows:

 not required under §278-33 N (1), Menominee Tribal Code.

5. The person who took this child into custody and the departmental/intake worker have made reasonable efforts to return the child home while assuring the child's health and safety.

6. The Uniform Child Custody Jurisdiction Act Affidavit is attached to this Petition.

I request adjudication and entry of an appropriate dispositional order.

▶ _____
 Tribal Prosecutor/Counsel/Petitioner

 Name Printed or Typed

 Address

 Email Address Telephone Number

 Date State Bar No. (if any)

- DISTRIBUTION:
1. Court
 2. Child
 3. Parent/Guardian/Legal Custodian/Indian Custodian
 4. Department/Agency
 5. Tribe
 6. Other Interested Parties