

DHHS RECORD CHECK FORM

A petition requesting appointment of a guardian/successor guardian is being filed with this court. [Complete #1, 2, 3 and 4]

A petition seeking to terminate the guardianship is being filed with this court. [Complete #1, 2 and 4]

Change of Venue [Complete # 1, 2, 3, 4]

For DHHS Use Only

1. Minor Child's Name

_____ First Middle Last

Date of Birth _____

Place where child will live if petition is granted:

Guardian's home Mother's home Father's home Other _____

_____ Address City State Zip

Telephone # _____

2. Minor's Parents

Mother's Name _____ First Middle Last

Formerly Known As _____

Date of Birth _____ Telephone # _____

Address _____

Relationship to Proposed Guardian _____

Father's Name _____ First Middle Last

Formerly Known As _____

Date of Birth _____ Telephone # _____

Address _____

Relationship to Proposed Guardian _____

