



INSTRUCTIONS FOR COMPLETING PETITION FOR GUARDIANSHIP OF A MINOR

Self Help Legal Resource Center
811 Port Street, St. Joseph, MI 49085 • 269.983.7111
1205 N. Front Street, Niles, MI 49120 • 269.684.5274 Ext. 6202

This complete packet for Guardianship needs to be filled out as much as possible. Call and make an appointment at the Self-Help Legal Resource Center for a Thursday or Friday to obtain a case number and Judge assigned to your case. Then, your case will be filed in the Probate Division. Once approval is given from the Probate division, you will be called concerning any correction to be completed, and given a hearing date.

Records Check Release/Central Registry Clearance

Each proposed guardian and any other adults living in the home **must complete, sign and date the information required on this form**. The Probate Court will do a routine background check on each proposed guardian. Please follow the instructions closely on each form. These forms will be placed in a sealed confidential envelope after the Judge reviews the results and will not be part of the public record. (If there is more than one guardian you will need to make a copy of the Central Registry Clearance so that each proposed guardian can fill one out. There is room on the records check release for two people to complete and **sign**.) **A clean copy of your driver's license or photo ID for each proposed guardian must accompany your filing.** The name and address on your ID must be current and must match the address on the Petition.

Affidavit for Suspension of Fees and Costs

If, as proposed guardian, it would impose a hardship to pay the filing fee of \$187.00, you may complete the Affidavit to Suspend Fees. Please be sure to complete every line of the form, and if a line does not apply to you please put N/A. **DO NOT** sign the form until you are in front of a Notary Public or Deputy Register. The Judge will review the form after you submit the paperwork. If approved we will process the paperwork and be in touch with you. If the waiver of fees is not approved we will contact you and ask that you bring in the filing fee before we can process the paperwork. (Note: If the minor is 14-17 years of age they may petition the Court to ask for a guardian and there is no filing fee in that circumstance)

Petition for Appointment of Guardian of Minor (PC 561)

To begin your Guardianship you must file several papers. A "Petition for Appointment of Guardian of a Minor" is one of those papers. The Petition states the basic facts about your guardianship and asks the Court to make a decision about any guardianship matters, you will need to provide the Court with a copy of the **minor's birth certificate**.

Please print neatly.

1. Do not fill in the "Case No." box. The Probate Clerk will give you a case number later.
2. The Petition must be legibly typed or printed in blue or black ink (in the English language).
3. Next to "In the matter of _____", fill in the minor's FULL name, then the last four digits of the minor's Social Security number at the end of the line.
4. Paragraph 1. Fill in the person with care/custody of minor and your relationship to minor (i.e., grandparent, aunt or uncle, friend, limited guardian, etc.).
5. Paragraph 2. Fill in minor's date of birth, check the box that applies for gender. Fill in the complete county and address. Next line, fill in the county only and add an address if different than above. Check the next box if the minor is a citizen of a foreign country.
6. Paragraph 3. Check the box that applies.

7. Paragraph 4. List the **FULL** names of the father, mother, and person with care/custody of minor, date of birth, address and telephone number. If the father is not on the birth certificate and paternity has not been established, print: **Father's Paternity not Established** in the father's name. If one or both of the parents are deceased, fill in their names and write **Deceased** after the name(s). You will need to provide the court with a death certificate(s).
If neither parent is living, fill in the complete full names and address of the minor's grandparents and nearest of kin who are adults. Under the graph fill in if any of the person's listed above are under any legal incapacity.
8. Paragraph 5. The court needs to know if there are court cases involving your family. If there have been no other court cases, go to paragraph 6. If there have been other court cases, fill in the information asked for. You will need to provide the Probate Court with a copy of the final order in that case.
9. Paragraph 6. The minor is in need of a guardian because: check a, b, or c.
10. Paragraph 7. Temporary guardianships are granted only in life/death situations or if the child is in grave danger for any reason. If this does not apply, do not fill out this part.
11. Paragraph 8. Fill in the proposed guardian's name, address, and telephone number.
12. Paragraph 9. Check the box(es) that apply.
13. When you are ready to file your case, write in today's date, sign your name, address and telephone number. If there is a co-guardian, they will also need to write in today's date, sign, address, and telephone number.
14. Paragraph 10. If the minor is 14 years of age or older he/she may nominate a guardian(s). Fill in full name(s) and address. Minor needs to sign their name, address, and telephone number.

MCL 700.5204, MCL 700.5213, MCR 5.125(C)(19), MCR 5.404

Minor Guardianship Social History (PC 670)

Each proposed guardian must complete a Social History. If there is more than one proposed guardian you will need to make a copy of the Social History form. These forms will be placed in a sealed confidential envelope after the Judge has reviewed them and will not be part of the public record. Please print neatly. Fill in with complete full names, addresses, and detail. No abbreviations.

MCR 5.404(A)(4)

Order Regarding Appointment of Guardian/Limited Guardian of Minor (PC 653)

Check the box that applies to this guardian.

1. Provide the child's full name.
2. Under THE COURT FINDS: check the boxes that apply to your situation. Under #4 a, b, or c, this should match what you checked on the Petition for appointment of guardian of minor (PC 651) #6. Check box #9, and enter the guardian(s) name(s), address and telephone number. Next, check the type of guardianship.

MCL 700.5106, MCL 700.5204, MCL 700.5205, MCL 700.5212, MCL 700.5213, MCR 5.402(E)

Acceptance of Appointment (PC 571)

Each proposed guardian will need to complete this form. If there is more than one proposed guardian you will need to make a copy. Please provide the child's full name on the first line. In #1 you will need to fill in Full Guardian or Limited Guardian, depending on the petition filed. You will need to complete the section at the bottom including date, signature and contact information.

MCL 700.3601, MCL 700.3602, MCL 700.5214, MCL 700.5301, MCL 700.5307, MCL 700.5412, MCL 700.7202, MCR 5.501

Letters of Guardianship (PC 633)

Provide the child's full name on the first line. Please complete the name and address and guardian's telephone number boxes.

1. Check the box by the court as _____ (Type the guardian (full, limited, temporary, etc.).
2. Paragraph 2. Check a. Go to the next form.

MCL 330.1631, MCL 700.5103, MCL 700.5214, MCL 700.5215(f),(g), MCL 700.5414(a), (e), MCL 700.5417, MCR 5.202, MCR 5.402(D), MCR 5.405(C), MCR 5.406(A), MCR 5.409

Guardianship Agreement form

Please print neatly.

1. In the mater of " _____", fill in the minor's full name.
2. Read the Guardianship Agreement/Restrictions.
3. The proposed Guardian(s) MUST sign this form. If the parents' signatures cannot be secured, the Court will accept the form without them.

Petition for Appointment of Limited Guardian of Minor (PC 650)

In the event that the parent is going to nominate a person/persons to be guardian of their child, they will fill out this form. The parent/parents MUST be the petitioner(s). The directions are similar to the Petition to appoint full guardian. Please follow those directions when completing this form. Contact a Self-Help Legal Resource Center staff if you need this form.

MCL 700.5205, MCR 5.125(C)(19), MCR 5.404

Limited Guardianship Placement Plan

The parent(s) must complete this form to give the Court their plan for having the child returned to their custody at some point in the future.

Notice of Hearing (PC 562)

Please print neatly.

1. "In the matter of _____" fill in the minor's **FULL** name.
2. You do not have a hearing date or time: proceed to the location and fill in: **Berrien County Probate Court, 811 Port Street, St. Joseph, MI 49085**. If you cannot fit all of the address on the line, continue under the location line.
3. Next, for the following purpose(s): (state the nature of the hearing): **Petition for Guardianship of a Minor**.
4. When you are ready to file your case, sign your name, address, and telephone number. Do not date this form until you have a hearing date.
5. Once your packet is completely filled out and ready for filing, it will be assigned a case number and Judge. Then, it will be sent to Probate Court Registrar for approval. Next, you will be notified by Probate Court or the Self-Help Legal Resource Center if corrections or additional information is needed. Filing fee will be addressed and you will be given a hearing date.

MCL 700.1401, MCL 710.21 et seq., MCR 3.802(A)(3), MCR 5.102, MCR 5.109(2)

Proof of Service (pc 564)

1. Provide the child's full name on the first line

2. Paragraph 1: Indicate the paperwork that was served to them (In most cases it will be Petition for Appointment of Guardian of Minor and Notice of Hearing. If other paperwork is served on them you will need to include that as well)
3. Paragraph 2: Identify your method of service, whether by first-class mail, registered/certified (copy of return receipt attached) or personal service. Provide the parent's name and address. This form will be dated at a later date.
4. Be sure to sign the bottom of the form before submitting to the Court once your case receives an approval from Probate Court. You will be contacted by the court with a hearing date. You will then be asked to mail a copy of the Petition for Appointment and Notice of Hearing to the interested parties. Date the original proof of service and file with Probate Court.

MCL 700.1306, MCL 700.1401, MCR 5.104(A), MCR 5.105, MCR 5.107

Waiver/Consent (PC 561)

If you are in contact with the parent(s) and they are agreeable to the appointment of you as guardian you can have them complete the waiver.

1. Provide the child's full name on the first line.
2. Depending on which parent, they are interested in the matter as Mother or Father.
3. : They are consenting to appointment of guardian of minor.
4. They are waiving notice of Petition for Appointment of Guardian of Minor. They should date, sign and complete the contact information at the end of the form.

MCL 700.1402, MCR 5.104(B)

IN THE EVENT THAT EITHER PARENT OR BOTH CANNOT BE LOCATED OR ARE UNCOOPERATIVE AND THEY CANNOT BE SERVED BY MAIL OR IN PERSON PLEASE FOLLOW THE INSTRUCTIONS BELOW

Affidavit Regarding Attempts to Locate Parent of Minor Child

If you made attempts to find both parents you will need to fill out one form for each parent. If necessary you will need to make a copy of the form provided. Please complete each form specifying the date of attempted contact, the method and outcome, as set forth in the table on the form. Please be sure to sign the form in front of a notary before you submit it to the Court. Please ask the Self-Help Legal Resource Center staff for this form.

Publication of Notice of Hearing (PC 563)

After you receive a hearing date and related information from the Court you will need to publish the information specifically to the parents in a Berrien County newspaper. (Please note that mailers such as The Berrien County Record, Harbor County News, Herald Palladium, UJournal Era, New Buffalo Time, South Bend Tribune, and Tri-City Record. (Please note that mailers such as the The Trade Lines and MailMax are not acceptable for publication.)

1. Provide the child's full name.
2. TO ALL INTERESTED PERSONS including: provide the parent's full name(s).
3. Fill in the hearing for date, time, and location: Berrien County Probate Court, 811 Port Street, St. Joseph MI 49085 or South County Building, 1205 N. Front Street, Niles, MI 49120; Judge's name and bar number, date and sign, address, telephone number.
4. In the space after the phrase "for the following purpose" you will insert 'Petition for Appointment of Guardian of Minor'

5. Go to: PUBLISH ABOVE INFORMATION ONLY and insert **Publish 1 time(s)** in Name of insert **publication in Berrien County**. Furnish 1 copies to Probate Court. Forward statement for publication charges to guardian.

MCL 700.1401(1), MCL 700.3403, MCL 700.5405, MCR 5.105(A)(3), MCR 5.106, MCR 5.308(B)(2)(b)

Take the form to a Berrien County newspaper of your choice for publication. This must be published at least 14 days prior to the hearing date. If the publication is not done in a timely manner your hearing will need to be rescheduled. It is best to get the publication done as soon as possible so that you will not run into that issue.

Annual Report of Guardian on Condition of Minor (PC 654)

This form is going to be due every year on the anniversary of your appointment (see below). Please make copies of the form so that you will always have a supply on hand and will be able to file your report in a timely manner. This report will be due each year until the child turns 18 or until further court order.

MCL 700.5215(f), MCR 5.409(A)

****IMPORTANT: GUARDIAN REQUIREMENTS****

After your appointment as guardian you will be given certified Letters of Guardianship as your legal document of authority to make decisions for the child. Please read both sides of that form carefully. There will be information given on the back of the Letters of Guardianship that will be the due date for your annual guardianship report. The report will be due *every year* on that date. If you are late you will be sent a deficiency notice and will be required to appear before the Judge and explain why the report was not timely. Please be sure to mark your calendar so that each year your report is filed within two weeks prior to two weeks after the due date. You will not find it necessary to appear before the Judge if the report is received in a timely manner.

INSTRUCTIONS FOR COMPLETING "PETITION FOR APPOINTMENT OF GUARDIAN OF INCAPACITATED INDIVIDUAL"

Please type or print neatly using black or blue ink.

Items A through Q must be read and filled in (when required) before your petition can be filed with the court. Please read the instruction for each item. Then fill in the correct information for that item on the form.

- A** Enter the name of the individual who you believe needs a guardian.
- B** Enter the date of birth of the individual named in **A** in Ref. No. row 1 on form MC 97, then fill in the race, and sex of the individual. Enter the address where the individual is currently located. This address may or may not be the home of the individual. For example, if the individual is currently in the hospital, enter the address of the hospital.
- C** Enter your name in the first line and your relationship to the individual (or your interest) on the second line.
- D** Check this box if there is or has been a case in the family division of the circuit court involving the individual in **A**. Examples of a family division case are personal protection, abuse or neglect, or a name change. If you have checked this box, enter the name of the court, the case number of the action, the name of the judge assigned to that case. Then place a check in the box indicating whether that case is still pending or not.
- E** Enter the city, village, or township and county and state the individual is a resident of and the full home address and telephone number of the individual.
- F** Check the boxes that apply and provide the name(s) and address(es).
- G** If the individual has a patient advocate and you believe there is a problem, check only the boxes that apply.
- H** Check the boxes that you believe apply to the individual.
- I** **Explain in as much detail as possible** specific examples of the individual's conduct that lead you to believe he or she needs a guardian. Give specific examples of his or her conduct that supports what you checked in **H** and that demonstrate the need for a guardian. **This information is extremely important for the court in making a decision about the need to appoint a guardian.** Use additional sheets of paper if needed.
- J** Enter the name, address, and telephone number of the person or agency who currently has care and custody of the individual. If there is no one, leave blank.
- K** Check whether the individual is or is not entitled to receive Veterans Administration benefits. If you checked that the individual is entitled to benefits, enter his or her VA claimant number.
- L - M** Check all the boxes that apply and enter the names, relationships, addresses and telephone numbers of each relative of the individual. Presumptive heirs includes minor children, if any. If any of the adults named in **L** are under legal incapacity, enter the names in **M**. If you check the last box in **L** (item 10), you must notify the Attorney General by sending a copy of this form to: Attorney General, Public Administration, PO Box 30755, Lansing, Michigan 48909.
- N** Enter the name, address, and telephone number of the person you want to be appointed as guardian of the individual. Enter the relationship, if any, that this person has to the individual. Check the box for either a full guardian or a limited guardian.
- O** Check the box if there is an emergency requiring the appointment of a temporary guardian before the hearing on this petition is held.
- P** Enter today's date and sign your name.
- Q** If the individual wants to nominate someone to be his/her guardian, check the box and enter the name, address, and telephone number of the person the individual is nominating. The individual must sign and date the form.