



☐ ATTORNEY OR ☐ PARTY WITHOUT ATTORNEY		TRIBAL BAR NO:	FOR COURT USE ONLY
FIRST AND LAST NAME:			
STREET ADDRESS:			
CITY:			
STATE:			
ZIP CODE:			CASE NO.:
PHONE:			PARTY 1 / PETITIONER:
EMAIL:			PARTY 2 / RESPONDENT:
ATTORNEY FOR (name):			
WILTON RANCHERIA TRIBAL COURT 9245 LAGUNA SPRINGS DRIVE, SUITE 110 ELK GROVE, CA 95758 tribalcourtinfo@wiltonrancheria-nsn.gov 916.683.6000 ext.1002			
☐ TEMPORARY GUARDIANSHIP ☐ INDEFINITE GUARDIANSHIP ☐ EMERGENCY GUARDIANSHIP			
IN RE: GUARDIANSHIP OF THE ☐ PERSON ☐ ESTATE OF (full legal name):			
			MINOR
PETITION FOR GUARDIANSHIP OF MINOR			
FILL OUT ONE PETITION FOR EACH MINOR (PROSPECTIVE WARD). TYPE OR PRINT USING BLUE OR BLACK INK.			

I, _____, PARTY 1 / PETITIONER, am interested in this matter and make this petition as (*relationship to the child*) _____.

1. JURISDICTION

So far as is known to Petitioner, an action within the jurisdiction of another Court concerning the Prospective Ward ☐ has ☐ has not been filed and ☐ remains* ☐ is no longer pending.

*The name of the Court and Case number are:

NAME OF COURT:	CASE NO.:
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CASE NO.:

2. PROSPECTIVE WARD'S INFORMATION (*Who is the person who needs guardianship?*):

FULL LEGAL NAME (FIRST, MIDDLE, LAST)			DATE OF BIRTH (MM/DD/YYYY)	AGE	SEX
STREET ADDRESS			APT		
CITY			STATE		
ZIP			PHONE		
TRIBAL AFFILIATION			EMAIL		
☐ IS AN ENROLLED MEMBER OF ☐ IS ELIGIBLE FOR MEMBERSHIP IN WILTON RANCHERIA.					

3. REASONS FOR GUARDIANSHIP

The Prospective Ward is in need of a guardianship because

- a. ☐ the parental rights of both parents or of the surviving parent have been terminated or suspended by
- ☐ death.
 - ☐ disappearance.
 - ☐ confinement in a place of detention.
 - ☐ judicial determination of mental incompetency.
 - ☐ a previous Court Order other than an Order appointing a limited guardian of the minor.
 - ☐ Judgement of divorce or separate maintenance.

OR

- b. ☐ the parent permits the Prospective Ward to reside with another person and does not provide the other person with legal authority for the care and maintenance of the Prospective Ward and the Prospective Ward is not residing with a parent at this time.

OR

- c. ☐ the biological parents of the Prospective Ward were never married to each other and _____, the custodial parent ☐ died, ☐ has disappeared since (date of disappearance): _____, and the other parent has not been granted legal custody by Court Order. ☐ The proposed guardian is related to the Prospective Ward.



CASE NO.:

4. A temporary guardianship is necessary because:

5. **CURRENT CUSTODY** The person/agency (if any) who currently has care and custody of the child is

☐ the proposed guardian ☐ someone else and their information is below:

FIRST AND LAST NAME OR AGENCY OR ORGANIZATION NAME			
DATE OF BIRTH (MM/DD/YYYY)	AGE	SEX	RELATIONSHIP TO PROSPECTIVE WARD
STREET ADDRESS		APT	PHONE
CITY	STATE	ZIP	EMAIL
TRIBAL AFFILIATION			
☐ IS AN ENROLLED MEMBER OF ☐ IS ELIGIBLE FOR MEMBERSHIP IN WILTON RANCHERIA.			
☐ IS AN ENROLLED MEMBER OF ☐ IS ELIGIBLE FOR MEMBERSHIP IN _____			
A FEDERALLY RECOGNIZED TRIBE.			
☐ IS NOT A MEMBER OR ELIGIBLE FOR MEMBERSHIP IN A TRIBE. ☐ UNKNOWN.			



CASE NO.:

6. **INTERESTED PARTIES** Check the boxes that apply to the Prospective Ward and fill in information for each (living person) below. ☐ Parent(s) ☐ Caretaker(s) ☐ Current Guardian ☐ Spouse or Partner

FIRST AND LAST NAME			DATE OF BIRTH (MM/DD/YYYY)	AGE	RELATIONSHIP
STREET ADDRESS			APT		
PHONE					
CITY	STATE	ZIP	EMAIL		
TRIBAL AFFILIATION					
☐ IS AN ENROLLED MEMBER OF ☐ IS ELIGIBLE FOR MEMBERSHIP IN WILTON RANCHERIA.					
☐ IS AN ENROLLED MEMBER OF ☐ IS ELIGIBLE FOR MEMBERSHIP IN _____					
A FEDERALLY RECOGNIZED TRIBE.					
☐ IS NOT A MEMBER OR ELIGIBLE FOR MEMBERSHIP IN A TRIBE. ☐ UNKNOWN.					

FIRST AND LAST NAME			DATE OF BIRTH (MM/DD/YYYY)	AGE	RELATIONSHIP
STREET ADDRESS			APT		
PHONE					
CITY	STATE	ZIP	EMAIL		
TRIBAL AFFILIATION					
☐ IS AN ENROLLED MEMBER OF ☐ IS ELIGIBLE FOR MEMBERSHIP IN WILTON RANCHERIA.					
☐ IS AN ENROLLED MEMBER OF ☐ IS ELIGIBLE FOR MEMBERSHIP IN _____					
A FEDERALLY RECOGNIZED TRIBE.					
☐ IS NOT A MEMBER OR ELIGIBLE FOR MEMBERSHIP IN A TRIBE. ☐ UNKNOWN.					

FIRST AND LAST NAME			DATE OF BIRTH (MM/DD/YYYY)	AGE	RELATIONSHIP
STREET ADDRESS			APT		
PHONE					
CITY	STATE	ZIP	EMAIL		
TRIBAL AFFILIATION					
☐ IS AN ENROLLED MEMBER OF ☐ IS ELIGIBLE FOR MEMBERSHIP IN WILTON RANCHERIA.					
☐ IS AN ENROLLED MEMBER OF ☐ IS ELIGIBLE FOR MEMBERSHIP IN _____					



CASE NO.:

A FEDERALLY RECOGNIZED TRIBE.

☐ IS NOT A MEMBER OR ELIGIBLE FOR MEMBERSHIP IN A TRIBE. ☐ UNKNOWN.

Legal Incapacity of Interested Parties

None of the adults named in Item 5 are under any legal incapacity **except**:

FIRST AND LAST NAME	LEGAL INCAPACITY	REPRESENTATIVE

7. **I REQUEST** that the Court determine the Prospective Ward is in need of guardianship and appoint the following person to be the guardian:

☐ the same person as listed in item 5 (if box is checked, skip to next item)

FIRST AND LAST NAME OF PROPOSED GUARDIAN			DATE OF BIRTH (MM/DD/YYYY)
STREET ADDRESS		APT	PHONE
CITY	STATE	ZIP	EMAIL
RELATIONSHIP TO PROPOSED WARD			
TRIBAL AFFILIATION			
☐ is an enrolled member of ☐ is eligible for membership in Wilton Rancheria.			
☐ is an enrolled member of ☐ is eligible for membership in _____, a federally recognized tribe.			
☐ is not a member or eligible for membership in a tribe. ☐ unknown.			

(Only complete this box if you are asking the Court to appoint a co-guardian)

FIRST AND LAST NAME OF PROPOSED CO - GUARDIAN			DATE OF BIRTH (MM/DD/YYYY)
STREET ADDRESS		APT	PHONE
CITY	STATE	ZIP	EMAIL
RELATIONSHIP TO PROPOSED WARD			
TRIBAL AFFILIATION			
☐ is an enrolled member of ☐ is eligible for membership in Wilton Rancheria.			
☐ is an enrolled member of ☐ is eligible for membership in _____, a federally recognized tribe.			
☐ is not a member or eligible for membership in a tribe. ☐ unknown.			



CASE NO.:

8. EMERGENCY GUARDIANSHIP

No other person appears to have authority to act in these circumstances. I request a temporary guardian be appointed because the Prospective Ward is in **immediate danger of abuse or neglect** and these are the supporting facts: *(if not applicable, skip this item)*

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9. PER CAPITA DISTRIBUTIONS

The Prospective Ward's natural mother

☐ receives per capita distributions ☐ is eligible to receive per capita distributions

The Prospective Ward's natural father

☐ receives per capita distributions ☐ is eligible to receive per capita distributions

The Prospective Ward

☐ receives per capita distributions ☐ is eligible to receive per capita distributions

10. ATTACHMENTS TO PETITION

Filed with this Petition are the following documents (check all that apply):

- ☐ Confidential Supplemental Information
- ☐ Confidential Screening(s) of Proposed Guardian(s)
- ☐ **Additional documents are attached.**

The names of these documents are *(List one title per box below. Be sure to label each attachment using the same title as listed below and organize the attachments in the same order as listed below):*



CASE NO.:

11. ADDITIONAL INFORMATION

If more room is needed to explain any item, use the space below. Be sure to label each item.

12. ACKNOWLEDGEMENTS

☐ I understand that it is my responsibility to inform the Court of any contact information changes while this case is open. If my or the Prospective Ward's address or contact information changes, I will submit to this Court the new information or provide the new information in open Court on the record.

☐ I confirm that I provided a valid email address. I agree to check my email regularly. I understand that the Court will, and the other party may, use the email address for electronic service of documents and for correspondence regarding my case.

☐ I am willing and able to undertake the care, custody, and control of the Prospective Ward until the minor reaches the age of eighteen (18) or until the Court terminates or modifies the guardianship.

☐ I understand that the Wilton Rancheria Tribe and its Courts determine that the best interests of the Prospective Ward include consideration of the rights of the Prospective Ward as a Wilton Rancheria Tribal Citizen and the interest of the community and Tribe in retaining its Citizens in its society.

13. CERTIFICATION

I certify, under penalty of perjury under the laws of Wilton Rancheria and the State of California, that the foregoing and all attachments are true and correct to the best of my knowledge and belief.

TYPED / PRINTED NAME OF PROPOSED GUARDIAN:	SIGNATURE:	DATE:
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TYPED / PRINTED NAME OF PROPOSED CO-GUARDIAN:	SIGNATURE:	DATE:
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