## **STATE OF MAINE**

DISTRICT COURT

	Location
	Docket No.
n re:	
Minor	-
1 D.444 Information	PETITION FOR APPOINTMENT OF PERMANENT GUARDIAN OF MINOR  FULL LIMITED  18-A M.R.S. §§ 5-101, 5-105, 5-202-207
1. Petitioner Information:	
Name:	Date of Birth:
Legal residence:	
Telephone:	
2 Minor Subject of Cuardianship	Information
2. Minor Subject of Guardianship	information;
Name:	Date of Birth:
Legal residence:	
Mailing address:	
Telephone:	
	· ·
3. Relationship of nominated guardi	ian to the minor:
-	
4. Current location of minor (If same	e as item 2, enter "same"):
5. These are the facts that support th	ne need for a guardian:
• •	isagree with your opinion of the facts: Tes No
If yes, explain:	

7.		you attached a child custody affidavit (GS-010) as required by 19-A M.R.S. § ☐Yes ☐No.
8.	If yes, guardi	believe a limited guardianship is sufficient in this case?  Yes No. explain in detail the specific duties and powers you propose to have as the an and the specific parental rights and responsibilities you propose to be kept by nor's parent(s):
9.	relatio are to a. b.	, addresses, and telephone numbers of all persons who must be notified and aship of each such person to the minor. (Indicate if waivers of notice have been or be filed.) The following must be notified:  The minor if 14 or over unless the minor has consented or waived notice;  The person who has had principal care and custody of the minor during the 60-day period immediately preceding the date of petition;  Any living parent of the minor; and/or
	d.	Any other interested party as directed by the District Court Judge.
<u>N</u>	AME	ADDRESS         RELATIONSHIP         WAIVERS           Yes □No         □Yes □No           □Yes □No         □Yes □No           □Yes □No         □Yes □No
10	a. b.	of these statements is true?  Each parent with parental rights and/or each legal custodian consents to the guardianship.  A court has terminated or suspended all parental rights. (A certified copy of the order is attached.)  All parental rights of custody have been terminated or suspended by circumstances. Explain.
	d.	One parent is dead, and a court or other legal authority has determined that the surviving parent is incapacitated. Explain.
	e.	Living with the parent(s) or custodian(s) creates an intolerable living situation for the child. Explain.
	f.	☐ Both parents have died without appointing a guardian for the child. (Copies of

	σ	the death certificates are attached.)  There is a demonstrated lack of consistent participation by the non-consenting
	δ.	parent or legal custodian of the minor and a de facto guardian whose name an
		address is:
		Name:
		Legal residence:
11. NO	MI	NATION AND CONSENT OF MINOR. I,
bei	ng 1	14 years of age or older do hereby nominate
$\overline{}$	T TN	to be my (CHOOSE ONE) <b>FUL</b> MITED guardian and consent to his/her appointment as such without attending th
	ring	
nea		o·
Dated:		Signature of Minor
		r believes that the appointment of a (CHOOSE ONE) $\square$ FULL $\square$ LIMITEI
		he above-named minor is necessary and desirable and is in the minor's best interes
,		equests that the court:
		nine that appointment of a (CHOOSE ONE)  FULL LIMITED guardian for in proper;
		the requested appointment; and
		etters of appointment to the guardian.
1550	10 10	stiers of appointment to the guardian.
Dated:		
		Signature of Petitioner or Attorney
Attornav fo	or D	Petitioner, if any:
Auomey n	31 P	entioner, if any.
Name and	Mai	ine Bar Registration Number
Address		
Telephone	- Ni	
reichiioiic	, 1 N U	anioci
(Signature	of A	Attorney and Maine Bar Registration Number)

Attorney for Other Party, if any:		
Name and Maine Bar Registration Number	<u></u>	
Address		
Telephone Number		
STA	ATE OF MAINE	
COUNTY		
Personally appeared the above-named	e true.	and
	Before me,	
Date:	Attorney at Law/Notary Public/Deputy Clerk	
*********	*************	***
COUNTY		
Personally appeared the above-named	e true.	and
	Before me,	
Date:	Attorney at Law/Notary Public/Deputy Clerk	