

STATE OF INDIANA)
)
COUNTY OF ELKHART)

IN THE ELKHART SUPERIOR COURT 6

CASE NO: _____

IN RE THE GUARDIANSHIP OF:

Name of Minor Child

PETITION FOR APPOINTMENT OF TEMPORARY GUARDIAN FOR A MINOR

Comes now, _____, self-represented, and states:

1. The minor child, _____, age _____ (DOB: _____), who is currently residing at _____, is a minor and is subject to the jurisdiction of the Court by virtue of being a resident of Elkhart County, Indiana.
2. No Guardian for the Person or Estate of the minor has been appointed.
3. An emergency exists and immediate and irreparable injury to the person or injury, loss, or damage to the property of the minor may result before the minor can be heard in response to the petition.
4. The welfare of the minor requires immediate action.
5. No other person appears to have authority to act in the circumstances.
6. The reason for appointment of a guardian is to provide care and supervision of the person or property of the minor, and the interest of the petitioner in such appointment is:

a) The person or institution to be appointed Guardian is:

Name: _____

Address:

b) The persons most closely related by blood or marriage to the minor are:

i. Name: _____ Age: _____

Relationship: _____

Address: _____

ii. Name: _____ Age: _____

Relationship: _____

Address: _____

iii. Name: _____ Age: _____

Relationship: _____

Address: _____

iv. Name: _____ Age: _____

Relationship: _____

Address: _____

WHEREFORE, _____ requests that this Court set this matter for hearing, and upon hearing, appoint a temporary guardian for _____ as is appropriate, and order all other further relief that is just and proper in the premises.

I affirm under penalties for perjury that the foregoing representations and statements are true.

/s/ _____
Signature

Date

Printed Name

Email Address

CERTIFICATE OF SERVICE

I hereby certify that I sent a copy of this Petition to the other person's attorney, or to the other person if they are not represented by an attorney, via:

Registered mail at this address: _____

Certified mail at this address: _____

Sheriff

/s/ _____
Signature

Date