



PEACEMAKERS' COURT
THE SENECA NATION OF INDIANS
CATTARAUGUS / ALLEGANY TERRITORY

Proceeding for the Appointment of a
Guardian for

Respondent/ Infant

**PETITION FOR
APPOINTMENT OF
GUARDIAN OF**

____ Person ____ Property

By: _____,
Petitioner

File No.: _____

Case No.: _____

TO THE PEACEMAKERS' COURT:

The Petition of _____ respectfully shows:

1. The Petitioner's name is _____.
2. The Petitioner's Tribal Enrollment Number is _____.
3. The Petitioner resides at _____,
_____ (Town/City) _____ (State)
_____ County, _____ Territory.

4. IF MORE THAN ONE PETITIONER:

- A. The Petitioner's name is _____.
- B. The Petitioner's Tribal Enrollment Number is _____.
- C. The Petitioner resides at _____,
_____ (Town/City) _____ (State)
_____ County, _____ Territory.

5. The name of Respondent is _____.
6. The Tribal Enrollment Number of Respondent is _____.
7. The address of the Respondent is _____,
_____ (Town/City) _____ (State)
_____ County, _____ Territory.



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8. The date of birth and marital status of Respondent is:

D.O.B.: _____ Marital Status: _____

9. Is the Respondent admitted to a group home or facility, _____ Yes _____ No. If yes,

Where: _____
_____.

10. If Respondent is an Infant, the name, address and tribal enrollment of the parents: if not the Petitioner's in this Action:

Name: _____.

Tribal Enrollment Number: _____.

Address: _____.

A. If deceased, date of death: _____.

B. Any adult siblings of infant: _____ Yes _____ No. If yes, name and address:

11. The Petitioner(s) herein are of sound mind, adult and competent.

12. (A) Petitioner(s) request(s) appointment as Guardian of the Respondent's PERSON

because it is in Respondent's best interests for the following reasons: _____

_____.

(B) Petitioner(s) request(s) appointment as Guardian of Respondent's property for the following reasons: _____

_____.



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13. Check appropriate box:

- Respondent is able to attend a hearing.
- Respondent's presence at a hearing should be dispensed with because: _____

_____.

14. Respondent has never had a Guardian appointed: ____ Yes ____ No. If yes, state circumstances, name of Guardian and whether Guardianship was vacated: _____

_____.

WHEREFORE, your Petitioner(s) respectfully request(s) that Guardianship of: Person and/or Property of Respondent _____ be granted.

1. Dated: _____ **X** _____

(Phone Number) (Signature of Petitioner)

(Print Name)

2. Dated: _____ **X** _____

(Phone Number) (Signature of Petitioner)

(Print Name)

**** NOTE: SIGN YOUR NAME IN THE PRESENCE OF COURT CLERK / NOTARY PUBLIC****

**SENECA NATION OF INDIANS }
CATTARAUGUS / ALLEGANY } s.s.: VERIFICATION
TERRITORY }**

On this _____ day of _____, 20 _____, before me personally appeared _____ to me known to be the same person Described in and who executed the foregoing complaint, and who duly acknowledged that The information is true and correct to the best of their knowledge and belief.

(Court Clerk/ Notary Public)