

<b>STATE OF MICHIGAN</b> <b>JUDICIAL CIRCUIT - FAMILY DIVISION</b> <b>COUNTY</b>	<b>EX PARTE PETITION</b> <b>REGARDING VOLUNTARY</b> <b>FOSTER CARE AGREEMENT</b>	<b>FILE NO.</b>
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In the matter of \_\_\_\_\_  
Name of youth

DOB	Race	Gender	Current address
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1. On \_\_\_\_\_, the Department of Human Services and the youth named above signed a voluntary  
Date  
 foster care agreement in compliance with MCL 400.651 to extend foster care services to the youth. A report prepared pursuant to MCL 400.655, which includes a copy of the voluntary foster care agreement, is attached.
2. The name(s), date(s) of birth, and residence address(es) of the youth's parent(s) or legal custodian is/are: (Complete only if parental rights have not been terminated. Otherwise, enter "parental rights have been terminated.")
3. The name(s) and address of the youth's foster parent(s), if any, is/are:
4. The youth has been notified of the right to request a hearing regarding continuing foster care.
5. Jurisdiction of the \_\_\_\_\_ court over the youth, case number \_\_\_\_\_,  
 was terminated on \_\_\_\_\_.  
Date
6. Other:

**I REQUEST** that the court determine whether continuing in voluntary foster care is in the youth's best interests.

I declare that the statements in this petition are true to the best of my information, knowledge, and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of petitioner

\_\_\_\_\_  
Name (type or print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, state, zip Telephone no. \_\_\_\_\_

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Do not write below this line - For court use only