

STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	PETITION TO TERMINATE APPOINTMENT OF JUVENILE GUARDIAN, NOTICE OF HEARING, AND ORDER FOR INVESTIGATION	CASE NO.
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Court address _____ Court telephone no. _____

- In the matter of
name, alias(es), DOB
- I am the juvenile guardian. an interested person.
- The reasons why the court should take action are:

I request that the court:

4. Terminate the appointment of the juvenile guardian. I request _____
Name (type or print)
 _____ be appointed successor guardian.
Address City State Zip Telephone no.

Signature of petitioner Date Address

Name (type or print) City, state, and zip Telephone no.

NOTICE OF HEARING

A hearing on the above petition shall be held on _____ at _____
Day, date, and time
 _____ before _____
Location Judge/Referee Bar no.

TO ALL INTERESTED PERSONS (listed in MCR 3.921[C]): You are entitled to participate in this hearing. Any information you want the court to consider at this hearing must be submitted in writing and in advance to the court, the agency, the lawyer-guardian ad litem for the child, and, if any, the attorneys for the parties.

ORDER FOR INVESTIGATION

IT IS ORDERED:

The department shall perform an investigation of the juvenile guardianship and file a written report of the investigation with the court no later than 7 days before the hearing on the above petition. The report shall include the reasons why the appointment of the juvenile guardian should be terminated and a recommendation regarding temporary placement, if necessary.

IT IS FURTHER ORDERED:

Recommended by: _____
Referee signature Date

Date Judge Bar no.

Do not write below this line - For court use only

Reference Note: The term "department" refers to the Department of Health and Human Services.