STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	PETITION TO REVOKE JUVENILE GUARDIANSHIP, NOTICE OF HEARING, AND ORDER FOR INVESTIGATION	CASE NO.

Court address Court telephone no.

1. In the matter of
   name, alias(es), DOB

2. I am ☐ a department representative. ☐ the lawyer-guardian ad litem.

3. The reasons why the court should take action are:

4. **I request** that the court revoke the juvenile guardianship, reinstate jurisdiction over the child under the previous child protective proceeding, and place the child under the care and supervision of the department.

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

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 juvenile guardianship should be revoked and a recommendation regarding temporary placement, if necessary.

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.

MCR 3.979(F)