

LAC COURTE OREILLES TRIBAL COURT

In the matter of:

PETITION FOR

Name of proposed ward

GUARDIANSHIP

Date of Birth

PROTECTIVE PLACEMENT

Case No. _____

Petitioner name

**THIS PETITION WILL BE HEARD IN LAC COURTE
OREILLES TRIBAL COURT AS FOLLOWS:**

Petitioner.

_____, 20_____

Time: _____

The petitioner states as follows:

1. The following information is given for the petitioner:

Name: _____ Date of Birth: _____

Mailing Address: _____

Physical Address: _____

Resident of the Lac Courte Oreilles Reservation? _____ Member of the Lac Courte Oreilles Tribe? _____

I have exercised due diligence to locate all interested parties. The names and addresses of all interested parties and all others entitled to notice are as follows: **See attached.**

NAME

RELATIONSHIP

MAILING ADDRESS

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. The following information is given for the proposed ward:

Name: _____ Date of Birth: _____

Mailing Address: _____

Physical Address: _____

Resident of the Lac Courte Oreilles Reservation? _____ Member of the Lac Courte Oreilles Tribe? _____

The proposed ward, if married does does not have children not of the current marriage.

The proposed ward: does does not have a current, valid financial durable power of attorney activated.
Name, address and phone: _____

does does not have a current, valid power of attorney for health care activated.
Name, address and phone: _____

does does not have other advance planning to avoid protective placement.
If the above-named powers of attorney or advanced planning exist, protective placement is still necessary
because: _____

See attached.

3. The following information is given for the proposed guardian:

Name: _____ Date of Birth: _____

Mailing Address: _____

Physical Address: _____

Resident of the Lac Courte Oreilles Reservation? _____ Member of the Lac Courte Oreilles Tribe? _____

4. The petitioner seeks an order creating the following guardianship:

- Temporary Guardianship of the person
 Permanent Guardianship of the estate

5. The petitioner does does not seek a protective placement.

6. The petitioner does does not request authority to consent or refuse consent to psychotropic medication.

7. The reason guardianship is sought: The proposed ward is incapable of managing his or her own affairs by reason of:

- Developmental disabilities, degeneration of the brain associated with aging, or organic brain damage.
 Serious and sustained abuse of alcohol or other drugs.
 Inability to control income or assets risking exploitation of proposed ward by others, or endangering the health, life or property of the proposed ward.

8. The proposed ward does does not have a guardian now.

Name and address of current guardian: _____

Name and location of court appointing guardian: _____

Attach copy of current guardianship order if available.

9. The income and assets of the proposed ward are as follows: See attached.

10. If protective placement is sought, petitioner alleges and will prove by clear and convincing evidence:

- (a) The proposed ward has a primary need for residential care and custody.
- (b) As a result of developmental disabilities, infirmities of again, chronic mental illness or other like incapacities, the proposed ward is so totally incapable of providing for his or her own care of custody as to create a substantial risk of serious harm to oneself or others. Serious harm may be occasioned by overt acts or acts of omission.
- (c) The proposed ward has a disability which is permanent or likely to be permanent.

11. If authority to consent or refuse consent to psychotropic medication is sought, petitioner alleges and will prove by clear and convincing evidence:

- (a) The proposed ward is likely to respond positively to psychotropic medication.
- (b) As a result of the proposed ward’s failure to take medication the person is unable to provide for his or her care in the community.
- (c) Unless protective services, including psychotropic medication, are provided the proposed ward will incur a substantial probability of physical harm, impairment, injury or debilitation or will present a substantial probability of physical harm to others.

12. Petitioner requests that a Guardian ad Litem be appointed for the proposed ward pursuant to LCOTCL §DMR.3.5.030

Signature of Petitioner

Date

Petitioner Attorney or Lay Advocate Name

Address of Petitioner Attorney or Lay Advocate

Phone Number

Fax number

NOTICE OF HEARING

This petition shall be served by the petitioner on the proposed ward, any spouse, parent or adult child of the proposed ward, and the guardian ad litem, **no less than 10 days prior to the hearing.** Service shall be personal or by first class mail.

All parties must attend the hearing at the date and time given on the first page of the petition. The hearing will be held in Lac Courte Oreilles Tribal Court, located in the Lac Courte Oreilles Tribal Government Building on the Lac Courte Oreilles Reservation at 13394 West Trepania Road.

Clerk of Court
For information call the Clerk of Court at 715-558-7438

Date