

**IN THE CHANCERY COURT OF _____ COUNTY, MISSISSIPPI
_____ JUDICIAL DISTRICT**

IN THE MATTER OF THE _____ CAUSE NO. _____
GUARDIANSHIP OF _____
_____, A MINOR
BY PETITIONER(S) _____

THE RELIEF SOUGHT HEREIN MAY AFFECT YOUR LEGAL RIGHTS. YOU HAVE A RIGHT TO NOTICE OF ANY HEARING ON THIS PETITION, TO ATTEND ANY SUCH HEARING, AND TO BE REPRESENTED BY AN ATTORNEY.

**PETITION FOR APPOINTMENT OF GUARDIAN(S) OF A MINOR
UNDER § 93-20-202**

_____, a person interested in the welfare of the
(Petitioner)
minor referenced herein, hereby certifies:

1. Petitioner resides at _____
(Street Address) *(City/State/Zip)*

2. Petitioner's relationship to the minor: _____

3. The following minor is in need of a guardian:

(Name of Minor) *(Date of Birth)*

(Current Street Address, City/State/Zip) *(Current County of Residence)*

4. The names and physical addresses of the minor's biological parents are (attach birth certificate if available):

Mother: _____
(Name of Mother) *(Physical Address, City/State/Zip)*

Mother's mailing address if different: _____

Father: _____
(Name of Father) *(Physical Address, City/State/Zip)*

Father's mailing address if different: _____

5. If one or both of the minor's biological parents are no longer living (attach death certificate), the minor's next closest relatives are:

_____	_____	_____
(Name)	(Relationship to Minor)	(Street Address, City/State/Zip)
_____	_____	_____
(Name)	(Relationship to Minor)	(Street Address, City/State/Zip)
_____	_____	_____
(Name)	(Relationship to Minor)	(Street Address, City/State/Zip)

6. Attorney(s) for the parents of the minor, if any (in any action or capacity):

_____	_____	_____
(Attorney's Name)	(Parent represented)	(Street Address, City/State/Zip)
_____	_____	_____
(Attorney's Name)	(Parent represented)	(Street Address, City/State/Zip)

7. As required under §§ 93-20-202 and 93-27-101 et seq., (if the required information is not furnished, the court, upon motion of a party or its own motion, may stay the proceeding until the information is furnished) the child has lived at the following places and with the following persons over the last five (5) years:

A. At _____
(Street Address, City/State/Zip)

with _____ from _____ to _____
(Name) (Date) (Date)

Current address of the person(s) named above (if different from address listed above):

(Street Address, City/State/Zip)

B. At _____
(Street Address, City/State/Zip)

with _____ from _____ to _____
(Name) (Date) (Date)

Current address of the person(s) named above (if different from address listed above):

(Street Address, City/State/Zip)

C. At _____
(Street Address, City/State/Zip)

with _____ from _____ to _____
(Name) (Date) (Date)

Current address of the person(s) named above (if different from address listed above):

(Street Address, City/State/Zip)

D. At _____
(Street Address, City/State/Zip)

with _____ from _____ to _____
(Name) (Date) (Date)

Current address of the person(s) named above (if different from address listed above):

(Street Address, City/State/Zip)

(If necessary, continue list here on another sheet of paper.)

8. As required under §§ 93-20-202 and 93-27-101 et seq., (if the required information is not furnished, the court, upon motion of a party or its own motion, may stay the proceeding until the information is furnished),

A. Petitioner has/has not participated as a party or witness or in any other capacity, in any other proceeding concerning the custody of or visitation with the child.
(CIRCLE ONE)

If so, identify the court, the case number, and the date of the child custody determination, if

any: _____
(List the court, the case number, and the date of the child custody determination)

B. Petitioner knows/does not know of any proceeding that could affect the current proceeding, including proceedings for enforcement and proceedings relating to domestic violence, protective orders, termination of parental rights, and adoptions.
(CIRCLE ONE)

If so, identify the court, the case number, and the nature of the proceeding:

(List the court, the case number, and the nature of the proceeding)

C. Petitioner knows/does not know the names and addresses of any person not a party to the proceeding who has physical custody of the child or claims rights of legal custody or physical custody of, or visitation with, the child.
(CIRCLE ONE)

If so, identify the names and addresses of those persons:

(List the names of persons who have or claim rights of physical or legal custody or visitation)

9. Disclosure of bankruptcy or criminal history:

(a) Petitioner has/has not been a debtor in a bankruptcy, insolvency, or receivership proceeding;
(CIRCLE ONE)

(b) Petitioner has/has not been convicted of any of the following:
(CIRCLE ONE)

- (i) A felony;
- (ii) A crime involving dishonesty, neglect, violence, or use of physical force; or
- (iii) Other crime relevant to the functions the person would assume as guardian or conservator.

10. It is necessary or convenient that a guardian be appointed for the minor because:

11. The Petitioner(s) should be selected as guardian for the minor because:

12. The minor does/does not have property other than personal effects.
(CIRCLE ONE)

If so, provide a list of the property and its estimated value:

Item:	Value:
_____	_____
_____	_____
_____	_____
_____	_____

13. The minor does/does not receive income and/or financial assistance.
(CIRCLE ONE)

WHEREFORE, Petitioner(s) requests appointment by this Court as Guardian of

(Name of Minor)

CERTIFICATION

Under penalties of perjury as provided by law pursuant to § 97-9-61 of the Mississippi Code Annotated, the undersigned certifies the statements set forth in this instrument are true and correct.

RESPECTFULLY SUBMITTED, this the _____ day of _____, 20_____.

_____, Petitioner
_____, Co-Petitioner
_____, Natural Mother
_____, Natural Father

**Every person or attorney who shall file a false affidavit shall be guilty of perjury and shall be punished as provided by law. (Miss.Code.Ann. § 97-9-19) Perjury committed on any judicial trial or inquiry other than on the trial of any indictment for a capital offense or for any other felony, or in any other case, is punishable by imprisonment for up to ten years. (Miss.Code.Ann. § 97-9-61)*

Prepared by:

Name: _____ Pro se

Address: _____

City: _____ State _____

Phone: _____ Zip: _____

Email address: _____

ATTESTATION OF PETITIONER

STATE OF MISSISSIPPI
COUNTY OF _____

Personally appeared before me, the undersigned authority, in and for the aforesaid jurisdiction, _____, who having been by me first duly sworn stated on his/her oath that the matters and things stated in the above foregoing instrument are true and correct as therein stated.

(Type Name Here)

SWORN TO AND SUBSCRIBED before me this the ____ day of _____, 20____.

NOTARY PUBLIC

My Commission Expires: _____

**ATTESTATION OF CO-PETITIONER
(if one exists)**

STATE OF MISSISSIPPI
COUNTY OF _____

Personally appeared before me, the undersigned authority, in and for the aforesaid jurisdiction, _____, who having been by me first duly sworn stated on his/her oath that the matters and things stated in the above foregoing instrument are true and correct as therein stated.

(Type Name Here)

SWORN TO AND SUBSCRIBED before me this the ____ day of _____, 20____.

NOTARY PUBLIC

My Commission Expires: _____

ATTESTATION OF NATURAL MOTHER

STATE OF MISSISSIPPI
COUNTY OF _____

Personally appeared before me, the undersigned authority, in and for the aforesaid jurisdiction, _____, who having been by me first duly sworn stated on her oath that the matters and things stated in the above foregoing instrument are true and correct as therein stated.

(Type Name Here)

SWORN TO AND SUBSCRIBED before me this the ____ day of _____, 20 ____.

NOTARY PUBLIC

My Commission Expires: _____

ATTESTATION OF NATURAL FATHER

STATE OF MISSISSIPPI
COUNTY OF _____

Personally appeared before me, the undersigned authority, in and for the aforesaid jurisdiction, _____, who having been by me first duly sworn stated on his oath that the matters and things stated in the above foregoing instrument are true and correct as therein stated.

(Type Name Here)

SWORN TO AND SUBSCRIBED before me this the ____ day of _____, 20 ____.

NOTARY PUBLIC

My Commission Expires: _____