ST	ATE OF WYOMING)			IN THE DISTRICT COURT	
CC	OUNTY OF) SS)			JUDICIAL DISTRICT	
GU	THE MATTER OF THE JARDIANSHIP OF)))		Probate No	
	Minor child(ren).) .)			
	PETITION FO	R APPO	OINTMENT O	F GUARDIA	AN OF A MINOR	
	rsuant to Wyo. Stat. § 3-2- tes and alleges as follows:		seq., Petitioner,		(name),	
1.	Petitioner requests the fo	llowing	type of guardian	ship:		
	Permanent Guardians	hip of a	minor,			
	☐ Temporary Guardians	ship of a	minor,			
	☐ Emergency Guardians	ship of a	minor,			
	Standby Guardianship	of a mi	nor.			
2.	The Petitioner is:					
	a person interested in	the wel	fare of the Mino	r(s).		
	OR					
	the Minor, who is 14 years of age or older. A petition for involuntary guardianship under					
	W.S. 3-2-101 has	has not	t been served up	on the Minor	·.	
3.	A juvenile court in the sta	ate of W	yoming has	does not l	nave jurisdiction over the Minor	
	Child in any juvenile deli	inquency	or other type o	f proceeding.	·	
4.	Information about the Minor Child(ren) pursuant to Wyo. Stat. § 20-5-309:					
	<u>Child #1</u>					
	Name:		Cu	rrent age:	Date of Birth:	

Petition for Appointment of Guardian of a Minor – Guardianship (Minor) Approved by Wyoming Supreme Court (2016); revised 7/31/2018 Page 1 of 8

City:		State:	Zip Code:
Home Phone #:		Email Address:	
Name and a	address of the person	on or facility having	the care, custody or control of the
Minor:			
List the place	es where the minor	child has lived in the	last five (5) years and the names of
the people th	ney lived with at tha	t time, if you know:	
Dates From/To	Town/City, State	Parent(s)/Caretaker	Current Address of Parent/Caretaker
A 44 a a 15 a	separate sheet if ne		
T ttuen u	separate sheet if he	eessar y	
<u>Child #2</u>			
Name:		Current age	e: Date of Birth:
Street Addre	ess:		
Mailing Add	dress, if different: _		
City:		State:	Zip Code:
Home Phone	e #: E	Email Address:	
Name and a	address of the person	on or facility having	the care, custody or control of the
Minor:			
List the place	es where the minor	child has lived in the	last five (5) years and the names of
the people th	ney lived with at tha	t time, if you know:	
Dates From/To	Town/City, State	Parent(s)/Caretaker	Current Address of Parent/Caretaker

Attach a	separate sheet if ne	cessary			
Child #3	.	,			
Name:		Current age	e: Date of Birth:		
			Zip Code:		
Name and a	address of the pers	on or facility having t	the care, custody or control of the		
Minor:					
			last five (5) years and the names of		
the people th	ney lived with at tha	nt time, if you know:			
Dates	Town/City, State	Parent(s)/Caretaker	Current Address of		
From/To			Parent/Caretaker		
Attach a	separate sheet if ne	caccary			
	about the Petition	•			
			in to the Miner(s):		
Name: Relationship to the Minor(s): Street Address:					
	Mailing Address, if different: State: Zip Code:				
	Home Phone #: Work Phone #:				
		of a Minor – Guardians			
π τοι πρροιπι	mem oj Guaraian C	ganinoi Guuruums	mp (minor)		

Petition for Appointment of Guardian of a Minor – Guardianship (Minor) Approved by Wyoming Supreme Court (2016); revised 7/31/2018 Page 3 of 8

5.

have have not been in the State of Wyoming for a period of six (6) months or more immediately before filing this <i>Petition</i> . (If not, seek the advice of a lawyer before filing.)	6.	Information about the parents: First Parent's Name:					
Street Address, if different: City: State: Zip Code: Home Phone #: Work Phone #: Email Address: Second Parent's Name: Is 2nd Parent deceased? Yes No. Is identity of 2nd Parent unknown? Yes No Street Address: Mailing Address, if different: Zip Code: City: State: Zip Code: Home Phone #: Work Phone #: Email Address:							
Mailing Address, if different: City: State: Zip Code: Home Phone #: Work Phone #: Email Address: Second Parent's Name: Is 2 nd Parent deceased? Yes No. Is identity of 2 nd Parent unknown? Yes No Street Address: Mailing Address, if different:		Is 1st Parent deceased? Yes No. Is identity of 1st Parent unknown? Yes No					
City:State:Zip Code: Home Phone #:Work Phone #: Email Address: Second Parent's Name: Is 2 nd Parent deceased?Yes No. Is identity of 2 nd Parent unknown?Yes No Street Address: Mailing Address, if different:		Street Address:					
City:State:Zip Code: Home Phone #:Work Phone #: Email Address: Second Parent's Name: Is 2 nd Parent deceased?Yes No. Is identity of 2 nd Parent unknown?Yes No Street Address: Mailing Address, if different:		Mailing Address, if different:					
Second Parent's Name:							
Second Parent's Name: Is 2 nd Parent deceased?		Home Phone #:	_Work Phone #: _				
Second Parent's Name: Is 2 nd Parent deceased?		Email Address:					
Is 2nd Parent deceased? No. Is identity of 2nd Parent unknown? No. Street Address: No. Street Address: No. Street Address: No. State: No. State:							
Street Address:		Second Parent's Name:	Second Parent's Name:				
Mailing Address, if different: City: State: Zip Code: Home Phone #: Work Phone #: Email Address: 7. The child(ren) named in this Petition for Appointment of Guardian of a Minor have not been in the State of Wyoming for a period of six (6) months or more immediately before filing this Petition. (If not, seek the advice of a lawyer before filing.) 8. The child(ren) named in this Petition for Appointment of Guardian of a Minor is is not an Indian child as defined in the federal Indian Child Welfare Act, 25 U.S.C. §§ 1901 et seq. OR I do not know if the child(ren) named in this Petition for Appointment of Guardian of a Minor is an Indian child. 9. Petitioner provides the following information pursuant to Wyo. Stat. § 20-5-309: I have not participated as a party or a witness or in any other capacity in any other court		Is 2 nd Parent deceased? ☐Ye	s 🗌 No. Is identi	ity of 2 nd Parent unknown? Yes No			
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☐ I have not participated as a party or a witness or in any other capacity in any other court							
☐ I have not participated as a party or a witness or in any other capacity in any other court	9.	Petitioner provides the following information pursuant to Wvo. Stat. 8 20-5-309					
	- •						
cust concerning the custout of the finite children and no other contractanties							
Petition for Appointment of Guardian of a Minor – Guardianship (Minor)	Petit			-			

•	concerning the minor child(ren) (including proceedings for enforcement, domestic
	violence protective orders, guardianship, termination of parental rights or adoptions) are
	currently pending in the State of Wyoming or in any other state; OR
	I have participated as a party or witness or in another capacity in another court
	proceeding concerning the custody, allocation of decision-making, or visitation/parenting
	time of the child(ren) listed in this Petition for Appointment of Guardian of a Minor as
	follows: (Please be specific and include the case number, court, state and nature of case,
	and date of child-custody determination, if any.)
	I know of no person or facility not a party to these proceedings who has physical
	custody of the minor child(ren) or who claims to have custody or visitation rights with respect to the minor child(ren);
	OR
	The following people are not parties in this matter, but have physical custody of the
	child(ren) or claim rights of parental responsibilities, legal custody, or physical custody or
	control of the child(ren): (List Names and Addresses)
	List (values and Addresses)
•	
	<u>.</u>
	The appointment of a guardian of the Minor(s) Child(ren) is necessary for the following
	reasons:
	The parent(s) consent(s) to the appointment of a Guardian. (Attach Consent of Parent.)
	All parental rights have been terminated by
	prior court order. (Attach a copy of the court order to this Petition.)
	death. (If available, attach a copy of the death certificate to this Petition.)
	☐ The parents are unfit and/or unwilling or unable to exercise their parental rights.
ı	for Appointment of Guardian of a Minor – Guardianship (Minor)

	in.)			
Guardianship has	previously been granted	to a third party who has died or beco		
incapacitated.		1 7		
1				
Petitioner nomina	tes himself/herself and rec	quests to be appointed as Guardian;		
OR		1		
Petitioner nomina	tes the following person t	o be appointed as Guardian:		
Name:				
Name.				
Street Address:				
Street Address: Mailing Address, if di	fferent:	Zip Code:		
Street Address: Mailing Address, if di City:	fferent:	Zip Code:		
Street Address: Mailing Address, if di City: Home Phone #:	fferent:State:	Zip Code:		
Street Address: Mailing Address, if di City: Home Phone #:	fferent:State:Work Phone #: _	Zip Code:		
Street Address: Mailing Address, if di City: Home Phone #: Email Address: OR	fferent:State:Work Phone #: _	Zip Code:		
Street Address: Mailing Address, if di City: Home Phone #: Email Address: OR	fferent: State: Work Phone #: _	Zip Code:		
Street Address: Mailing Address, if di City: Home Phone #: Email Address: OR The Minor, who is	fferent: State: Work Phone #: _	Zip Code:		
Street Address: Mailing Address, if di City: Home Phone #: Email Address: OR The Minor, who is	fferent: State: Work Phone #: 14 years of age or older, hor.)	Zip Code:		
Street Address: Mailing Address, if di City: Home Phone #: Email Address: OR The Minor, who is or Nomination of Min The Proposed Guardia	fferent: State: Work Phone #: 14 years of age or older, hor.)	Zip Code:; as nominated a Guardian. (Attach Cons		
Street Address: Mailing Address, if di City: Home Phone #: Email Address: OR The Minor, who is or Nomination of Min The Proposed Guardia the person nomina	fferent: State: Work Phone #: 14 years of age or older, hor.) an is (select one): ted as guardian in the will	Zip Code:; as nominated a Guardian. (Attach Cons		
Street Address: Mailing Address, if di City: Home Phone #: Email Address: OR The Minor, who is or Nomination of Min The Proposed Guardia the person nomina the person requeste	fferent: State: Work Phone #: 14 years of age or older, hor.) an is (select one): ted as guardian in the willed by the Minor Child wh	Zip Code:; as nominated a Guardian. (Attach Cons		

Tł	The Petitioner/Proposed Guardian is a fit and proper person to serve as guardian for the				
M	inor child(ren) for the following reasons:				
Tł	ne Proposed Guardian (check all that apply):				
	provides, or is likely to provide during the guardianship, services to the Ward in a ofessional or business capacity unrelated to the guardianship.				
	is, or is likely to become during the guardianship, a creditor of the ward, other than in e capacity as guardian.				
	has, or is likely to have during the guardianship, interests that may conflict with those the ward.				
	is employed by a person who would be disqualified from serving as guardian pursuant Wyo. Stat. 3-2-107.				
	It is necessary to appoint a Permanent Guardian for the Minor(s) because: (Describe				
th	e reasons why the Minor Child is in need of a permanent guardian.)				
_					
	It is necessary to appoint a Temporary Guardian and the appointment of a Temporary				
	uardian is in the best interest of the Minor(s). (Describe the reasons why a temporary tardian is needed and the date when the guardianship should end.)				
gu 	ardian is needed and the date when the guardianship should end.)				

18.	It is necessary to appoint an Emergency Guardian for the Minor(s) because of the likelihood of substantial harm to the Minor's health, safety or welfare, and that no other				
		prity and willingness to act in the circumstances. (Describe the			
		I the date when the guardianship should end.)			
19.	Petitioner requests the	ppointment of a Standby Guardian to be effective upon the			
	-	scribe the condition or event that would cause the standby			
	guardianship to go into effe	et. A standby guardianship is not effective until the occurrence			
	of the specified event or co	dition.)			
20.	Petitioner requests that the powers of the guardian be:				
	Unrestricted,				
	Limited by the following restrictions:				
	The Petitioner requests that an appointment of a Guardian be made, after notice and				
hearin	g, and such other and furthe	relief as the Court shall deem proper.			
	DATED:	, 20			
		(Signature of Petitioner)			
	(Phone Number)	(Printed Name of Petitioner)			
	(Address)	(City, State, Zip)			

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