## **TERMINATION OF PARENTAL RIGHTS**

TERMINATION OF FARENTAL RIGHTS			
CUSTOMER	NFORMATION		
Contact Person:	NLF Rep: (internal use only	·)	
Street Address:	Cell Phone:		
City, State, Zip Code:	Alternate Phone:		
EMAIL (required):			
PETITIONER'S	INFORMATION		
(1) Full Legal Name:			
(2) Date of Birth:			
(3) Street Address:			
(4) City, State, Zip Code:			
(5) Mailing Address: (if different)			
(6) Phone Number:			
(7) Email Address:			
(8) Relationship to the Child(ren):			
CHILD(REN)'S	INFORMATION		
(9) Full Legal Name of 1 <sup>st</sup> Child:		(10) SS#	
(11) Place of Birth:		(12) D.O.B.	
(13) Current Address:			
(14) Date when Child first started living at address:		☐ Male	☐ Female
(15) Full Legal Name of <b>2</b> <sup>nd</sup> <b>Child</b> :		(16) SS#	
(17) Place of Birth:		(18) D.O.B.	
(19) Current Address:			
(20) Date when Child first started living at address:		☐ Male	☐ Female
(21) Full Legal Name of <b>3<sup>rd</sup> Child</b> :		(22) SS#	
(23) Place of Birth		(24) D.O.B.	
(25) Current Address:			
(26) Date when Child first started living at address:		☐ Male	☐ Female

(27) Name of Biological Mother (if attioent from the Petitioner):  (28) Current or Last Known Address:  (29) Name and Address of Nearest Known Adult Relative if Current Address of Biological Mother is Unknown:  BIOLOGICAL FATHER'S INFORMATION  (30) Name of Biological Father (if different from the Petitioner):  (31) Current or Last Known Address:  (32) Name and Address of Nearest Known Adult Relative if Current Address of Biological Father is Unknown:  NIFORMATION: Before a case can be neard by the Family Court in the 8th Judicial District, the court must have jurisdiction over the parties and the subject matter. A court may hear the case if a party resides in the state. The state will have jurisdiction over the children if Newada is the "nome state" of the children. Home state means the children have lived here for at least the past 6 months. A court will have subject matter, jurisdiction will it is the type of matter that can be heard in family court such as divorce, custody, paternity, etc.  UCCJEA  Uniform Child Custody Jurisdiction and Enforcement Act  (33) Living Arrangements Last 5 Years. List the periods of residence and places where each child has lived within the last 5 years, and the name(s), present address and relationship to the child(ren) of each person (all adults) with whom the child(ren) has lived during that time period.  Time Period  (month/year)  Relationship:  Relationship:  Relationship:  Relationship:  Relationship:  Relationship:  Relationship:	BIOLOGICAL MOTHER'S INFORMATION				
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Time Period (month/year)  Relationship:	and the name(s), present address				
(month/year)  Lived with and Relationship:  Relationship:  Relationship:  Relationship:  Relationship:  Relationship:  Relationship:  Relationship:	1 <sup>st</sup> Child:				
Relationship:			City and State		
Relationship:   Relation	-	Relationship:			
Relationship:		Relationship:	_		
		Relationship:	_		
		Relationship:	_		
Relationship:		Relationship:	_		
		Relationship:			

Time Period	Name(s) of Person(s) the Child	City and State
(month/year)	Lived with and Relationship:	
	_	
	Relationship:	<del></del>
<del>-</del>	Relationship:	_
<u>-</u>	Relationship:	<u> </u>
	Relationship:	<u> </u>
	Relationship:	
	Relationship:	<del></del>
Child:		
Time Period (month/year)	Name(s) of Person(s) the Child Lived with and Relationship:	City and State
(monunyou)		
	_	
	Relationship:	
<del>-</del>	Relationship:	<u> </u>
<u>-</u>	Relationship:	<u> </u>
	Relationship:	
<u>-</u>	Relationship:	<u> </u>
	Relationship:	
	party or witness or in some other capacity in any other case in	ivolving the Child(ren)?
□ No.		
	ed in the following cases concerning the Child (provide all specifics	including the state, the court nam
number and the date of th	e child custody order, if any):	

(35) Do you know of any other case that could affect this case?  □ No.				
Yes, the following cases that could affect this case (provide all specifics including the state, the court name, the parties involved, the case number and type of case:				
(36) Do you know of anyone other than the parents who has custody of the child(ren) or who can claim a right to custody/visitation				
rights to the child(ren).				
□ No.				
☐ Yes, the following people have custody of the child(ren) or can claim custody/visitation of the child(ren) (list names and				
addresses of anyone who claims custody/visitation rights):  Name:				
Address:				
TERMINATION OF PARENTAL RIGHTS				
(37) Whose Parental Rights are Being Terminated?				
(38) Reason for terminating parental rights (check all that apply):				
Abandonment. The parent has not provided for the child(ren)'s support and has not communicated with the child(ren)				
Since (approximate date the parent last had any contact with the child(ren)				
☐ <b>Neglect</b> . The parent has refused to provide proper food, clothing, shelter, education, medical care, or other necessary				
care for the child(ren). Explain:				
☐ <b>Unfitness</b> . The parent has failed to provide the children with proper care, guidance, and support because of the				
parent's fault, habit, or conduct. Explain.				
Risk of Harm. The child(ren) would be at risk of serious physical, mental, or emotional injury if they were returned to				
the parent. Explain.				
☐ <b>Token Efforts</b> . The parent has made only token efforts to care for the child(ren). Explain.				

(39) Why is it in the child(ren)'s best interest to terminate parental rights?
ADDITIONAL MATTERS
(40) <b>Legal Guardian</b> . A legal guardian is someone other than a parent who has been appointed by a court or the parents to care
for the child(ren).  ☐ The child(ren) do not have a legal guardian.
☐ The child(ren) do not have a legal guardian. ☐ The child(ren) do have a legal guardian.
Name:
Address:
(41) Caretaker. The child(ren) currently live with and are being cared for by: (check one)
Both parties should provide future health insurance for the minor child(ren) if available.
☐ Future health insurance for the minor child(ren) should be provided by (name of parent)
(42) American Indian Child. (check one)
☐ The child(ren) are not known to be American Indian child(ren).
☐ Yes, I or the child(ren) are known to be American Indian child(ren).
(43) Public Assistance. (check one)
☐ No, the child(ren) and I do not receive public assistance.
Yes, I or the child(ren) receive public assistance.

(44) Name Change. If the parental rights are terminated: (check one)				
	s name(s) should NC			
☐ Yes, the child(ren)	)'s name(s) should be	e changed to:		
1 <sup>st</sup> Child New Name:				
	First	Middle	Last	
2 <sup>nd</sup> Child New Name:				
	First	Middle	Last	
3 <sup>rd</sup> Child New Name:				
	First	Middle	Last	
Notes:				