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SQUAXIN ISLAND TRIBAL COURT  
YOUTH COURT  
SQUAXIN ISLAND RESERVATION

IN RE: WELFARE OF:

Case No.: CI-

\_\_\_\_\_, an Indian child

PETITION TO ADOPT SITC § 10.20

DOB:

\_\_\_\_\_, Petitioner

Note on Motion Calendar:

DAY, MONTH, YEAR TIME

COMES NOW \_\_\_\_\_, the Petitioner, files this petition to adopt consistent with the Squaxin

Island Tribe's Youth Code Chapter 10.20, and alleges:

1. The Youth's name:  
The Youth's birth date:  
The Youth's residence:  
The Youth's tribal status:
2. The Youth's mother:  
The Youth's mother's birth date:  
The Youth's mother's residence:  
The Youth's mother's tribal status:  
  
The Youth's father:  
The Youth's father's birth date:  
The Youth's father's residence:  
The Youth's father's tribal status:
3. The full name to be given to the Youth to be adopted is:

- 1 4. The Petitioner's name:  
The Petitioner's age:  
2 The Petitioners place of residence:  
How long has the petitioner lived at that residence:  
3 Petitioner's tribal status:
- 4 5. The relation, if any, of the Petitioner(s) to the Youth:
- 5 6. A description of any previous civil proceedings (tribal or state) involving the care or custody of  
the Youth to be adopted and the results of those proceedings:  
6 [list all state and/or tribal court proceedings by case name and number]
- 7 7. The reasons the Petitioner(s) desire to adopt the Youth:  
8 [list your reasons for wanting to adopt:]  
9 7.1  
10 7.2  
11 7.3  
7.4
- 12 8. The names and addresses of all those having or claiming any right of custody, control, visitation,  
support or other legal interest in the Youth:  
13 [list – for example parents, grand-parents, guardian]
- 14 9. The names and addresses of all those whose consent is required (attach notarized consents):  
15 [list]
- 16 9. The Youth's mother is deceased: [check one] Yes  or No   
The Youth's mother's parental rights were voluntarily terminated: [check one] Yes  or No   
17 The Youth's mother's parental rights were involuntarily terminated: [check one] Yes  or No .
- 18 10. The Youth's father is deceased: [check one] Yes  or No   
The Youth's father's parental rights were voluntarily terminated: [check one] Yes  or No   
19 The Youth's father's parental rights were involuntarily terminated: [check one] Yes  or No .
- 20  
21 If parental rights have been terminated, a certified copy of the court order terminating parental  
rights must be attached.
- 22  
23 11. Petitioner is a member of the Youth's extended family: [check one] Yes  or No   
24 Describe how: [for example, the petitioner is the step-father]  
25

1 12. Other information that may be helpful to the Court:  
2  
3

4 A copy of this petition will be filed by the Court Clerk with the Squaxin Island Tribal Indian Child  
5 Welfare Office for it to begin work on a Pre-Adoption Report. See SITC § 10.20. \_\_\_\_\_. To complete the  
6 Pre-Adoption Report, ICW will conduct a complete home study, confer with social service staff and  
7 confer with the Squaxin Island Tribal Council.

8 By filing this Petition I authorize the Indian Child Welfare offices of the Tribe to conduct a  
9 background investigation, including criminal history, financial history, and drug and alcohol and mental  
10 health histories, and agree to provide the consents and releases necessary to release that information  
11 to the Family Wellness Team for the purpose of considering this petition.

12 \_\_\_\_\_ [Check if applicable] The Petitioner is a member of the Youth's extended family and  
13 requests that the Court waive the requirement of a formal Pre-Adoption Report.

14 By filing this petition with the Squaxin Island Tribal Court, I consent and submit to the personal  
15 and subject matter jurisdiction of that Court; and further agree to honor and obey all orders of the Court  
16 pertaining to the care and custody of the Youth. Finally, I understand and agree that if and when this  
17 petition is granted by the court, the Youth remains under the continuing jurisdiction of the Squaxin  
18 Island Tribal Court until the later of (a) the expiration of any applicable Youth Court Order or (b) the  
19 Youth reaches the age of eighteen.

20 Wherefore, based on the foregoing, the Petitioner requests that the Court: [check all that apply]

21 \_\_\_\_\_ Waive the requirement of a Pre-Adoption Report;

22 \_\_\_\_\_ Grant this petition and enter a Decree of Adoption

23 \_\_\_\_\_ Change the Youth's legal name from \_\_\_\_\_ to \_\_\_\_\_

24 \_\_\_\_\_ Other: \_\_\_\_\_.

25 I have read the foregoing petition and to the best of my knowledge it is true and accurate.

RESPECTFULLY SUBMITTED this \_\_ day of \_\_\_\_\_, 2006.

\_\_\_\_\_  
Print name: \_\_\_\_\_  
Petitioner