

<b>STATE OF MICHIGAN</b> <b>6<sup>th</sup> CIRCUIT COURT – FAMILY DIVISION</b> <b>OAKLAND COUNTY</b>	<b>PETITION FOR HEARING TO IDENTIFY</b> <b>FATHER AND DETERMINE OR</b> <b>TERMINATE HIS RIGHTS</b>	<b>FILE NO.</b>
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In the matter of \_\_\_\_\_, adoptee  
Full name of child

1. I am the mother of the adoptee named above who was born out of wedlock on \_\_\_\_\_ at  
Date

\_\_\_\_\_. The adoptee resides at  
City, county, and state

\_\_\_\_\_  
Address City State Zip

2. An action within the jurisdiction of the family division of circuit court involving the family or family members of the minor has been previously filed in \_\_\_\_\_ Court, Case Number \_\_\_\_\_, was assigned to Judge \_\_\_\_\_, and  remains  is no longer pending.

3. I plan to sign a  release  consent giving up my parental rights to the child.

4. I have joined with my husband in a petition for adoption.

5. The child is an Indian child as defined in MCR 3.002(5). The identity of the tribe is \_\_\_\_\_.  
Name of tribe, if known

6. The putative father of my child is \_\_\_\_\_  
Name (type or print) Birthdate (if unknown, state if over 18 years old)  
Address City State Zip

7. For part or all of the time from conception to the date the child was born, I was married to \_\_\_\_\_  
Name (type or print)

\_\_\_\_\_ whose last-known address is \_\_\_\_\_  
 \_\_\_\_\_ . He is not the father of the child.

8. **I request** the court to hold a hearing to determine the identity of the father of my child and to determine or terminate his parental rights.

I declare that this petition has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney name Bar no.  
 \_\_\_\_\_  
Address  
 \_\_\_\_\_  
City, state, zip Telephone no.

\_\_\_\_\_  
Petitioner name  
 \_\_\_\_\_  
Address  
 \_\_\_\_\_  
City, state, zip Telephone no.

Do not write below this line – For court use only