

1200 N TELEGRAPH RD PONTIAC, MI 48341	(248) 975-9511
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Petitioner	Respondent	Age/DOB
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SOCIAL INFORMATION REGARDING JUVENILE RESPONDENT

Father's name	Address	Home phone	Work phone
Mother's name	Address	Home phone	Work phone
Stepfather's name	Work phone	Stepmother's name	
Guardian/Custodian's name	Address	Home phone	Work Phone

Divorced:	Date of Divorce	Place of divorce: County	State
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Custody to: { } Father { } Mother { } Other (state name and address: _____)

Child living with: { } Father { } Mother { } Stepfather { } Other: _____

The respondent did the following acts or made the following threats which caused me to feel terrorized, frightened, intimidated, threatened, harassed or molested:

1. When _____
Where _____
What _____

2. When _____
Where _____
What _____

3. When _____
Where _____
What _____

(Attach extra sheets if necessary)

VERIFICATION UNDER MCR 1.109(E): I declare that the statements above are true to the best of my information, knowledge and belief.

Date	/s/ _____ Petitioner's/Next friend's signature
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