



PUEBLO OF LAGUNA COURT CIVIL COVER SHEET

This document is CONFIDENTIAL, and shall not be disclosed to the public. The purpose of this document is to assist the Court in keeping accurate records and making sure that we notify the correct people of upcoming Court hearings.

Because you started this legal action you are called the Petitioner(s). The person or persons that you are bringing the action against are called the Respondent(s).

IT IS IMPORTANT THAT ALL INFORMATION IS FILLED IN ACCURATELY OR TO THE BEST OF YOUR KNOWLEDGE. UNFILLED INFORMATION ONLY DELAYS THE COURT PROCESS.

PETITIONER

Name: _____ Date of Birth: _____ Social Security # ____ - ____ - ____

Tribal Affiliation: _____ Enrollment#: _____ Phone #: _____

Mailing Address: _____

Physical Address: _____

PETITIONER

Name: _____ Date of Birth: _____ Social Security # ____ - ____ - ____

Tribal Affiliation: _____ Enrollment#: _____ Phone #: _____

Mailing Address: _____

Physical Address: _____

RESPONDENT

Name: _____ Date of Birth: _____ Social Security # ____ - ____ - ____

Tribal Affiliation: _____ Enrollment#: _____ Phone #: _____

Mailing Address: _____

Physical Address: _____

RESPONDENT

Name: _____ Date of Birth: _____ Social Security # ____ - ____ - ____

Tribal Affiliation: _____ Enrollment#: _____ Phone #: _____

Mailing Address: _____

Physical Address: _____

IN THE PUEBLO COURT
PUEBLO OF LAGUNA
STATE OF NEW MEXICO

IN THE MATTER OF APPOINTMENT
OF A GUARDIAN FOR:

NO.

PETITION FOR APPOINTMENT OF GUARDIAN
FOR AN INCAPACITATED PERSON

COMES now PETITIONER, _____,
and states the following:

1. That the Laguna Pueblo Court has jurisdiction over the
subject matter herein;

2. That the name of the alleged incapacitated individual is
_____ and is _____ years of age and his/her
address is _____
_____;

3. That Petitioner requests that a Guradian be appointed for
the said individual for the following reason(s):

_____;

4. That a guardian has/has not been appointed or is/is not acting in another state or tribe for the said individual;

5. That the NAME and ADDRESS of the proposed guardian is

_____;

6. The qualifications of the proposed guardian are:

_____;

7. The names and addresses, as far as known or as can be reasonably be ascertained, of the persons most closely related by blood or marriage to the said individual are:

NAME _____
ADDRESS _____
NAME _____
ADDRESS _____
NAME _____
ADDRESS _____
NAME _____
ADDRESS _____;

8. The name and address of the person or institution having the care and custody of the said individual is:

_____;

9. The steps taken to find less restrictive alternatives to the proposed guardianship are:

WHEREFORE, the PETITIONER, prays that the above proposed guardian be appointed for the protection of the well being of the person and property of said individual and for such other relief as the Court may deem appropriate.

Respectfully submitted:

Signature