



PUEBLO OF LAGUNA COURT

P.O. Box 194 Laguna, New Mexico 87026

Tel. (505) 552-1900

Email: clerks@pol-nsn.gov

PETITION FOR GUARDIANSHIP (COVER SHEET)

IT IS IMPORTANT THAT PETITION IS FILLED OUT ACCURATELY OR TO THE BEST OF YOUR KNOWLEDGE. UNAVAILABLE INFORMATION WILL ONLY DELAY THE COURT PROCESS.

PETITIONER(S):

Name: _____ DOB: _____ Social No: _____
Tribal Affiliation: _____ Enrollment No: _____
Mailing Address: _____
Physical Address: _____
Email Address: _____ Phone No: _____

Name: _____ DOB: _____ Social No: _____
Tribal Affiliation: _____ Enrollment No: _____
Mailing Address: _____
Physical Address: _____
Email Address: _____ Phone No: _____

RESPONDENT(S):

Name: _____ DOB: _____ Social No: _____
Tribal Affiliation: _____ Enrollment No: _____
Mailing Address: _____
Physical Address: _____
Email Address: _____ Phone No: _____

Name: _____ DOB: _____ Social No: _____
Tribal Affiliation: _____ Enrollment No: _____
Mailing Address: _____
Physical Address: _____
Email Address: _____ Phone No: _____

PLEASE DOUBLE CHECK YOUR DOCUMENTS:

- Attach a copy of Birth Certificates for minor child(ren)
- Attach any supporting documents
- All Affidavits must be signed in front of a Notary
- Filing Fee of \$6.00 in a Money Order or Cashier's Check
- If you should have any questions or need assistance with the Petition, please refer to our Approved Attorney list for help. Thank you.

IN THE TRIBAL COURT
PUEBLO OF LAGUNA
STATE OF NEW MEXICO

CASE NO: _____

PETITION FOR GUARDIANSHIP

IN THE MATTER OF:

_____,
_____,

Minor(s)

COME(S) NOW, _____, (Petitioner(s), and for
the Petition for Appointment of Guardian, hereby STATE(S):

1. That the Laguna Pueblo Court has jurisdiction over the subject matter herein.
2. That the Petitioner(s) is/are:

☐ Related to the minor child(ren) and is/are the child(ren)'s

_____ (relation)

☐ Fictive Kin (not blood related) to the minor child(ren); please explain:

3. That the minor child(ren) subject to this Petition is/are:

NAME:		AGE:	DATE OF BIRTH:
ENROLLED LAGUNA TRIBAL MEMBER: (CHECK ONE): ☐ YES ☐ NO	ENROLLMENT NUMBER:	RESIDES:	
TRIBAL AFFILIATION:	NON-NATIVE: (CHECK ONE): ☐ YES ☐ NO		

NAME:		AGE:	DATE OF BIRTH:
ENROLLED LAGUNA TRIBAL MEMBER: (CHECK ONE): ☐ YES ☐ NO	ENROLLMENT NUMBER:	RESIDES:	
TRIBAL AFFILIATION:	NON-NATIVE: (CHECK ONE): ☐ YES ☐ NO		

NAME:		AGE:	DATE OF BIRTH:
ENROLLED LAGUNA TRIBAL MEMBER: (CHECK ONE): ☐ YES ☐ NO	ENROLLMENT NUMBER:	RESIDES:	
TRIBAL AFFILIATION:		NON-NATIVE: (CHECK ONE): ☐ YES ☐ NO	

4. That the Petitioner(s) is/are requesting to be appointed as guardian(s) of said minor child(ren) for the following reasons:

5. That the duration of the proposed guardianship shall be:

☐ Definite Proposed duration: _____

☐ Indefinite

6. Name of Natural Mother: _____

Tribal Member: ☐ Yes ☐ No

Tribal Affiliation: _____

Enrollment No: _____

Non-Native: ☐ Yes ☐ No

Deceased: ☐ Yes ☐ No, current age: _____

Natural Mother resides:

7. Notarized Affidavit of Consent from Natural Mother is attached:

☐ Yes ☐ No

Consent should be waived for the following reasons:

8. Name of Natural Father: _____

Tribal Member: ☐ Yes ☐ No

Tribal Affiliation: _____

Enrollment No: _____

Non-Native: ☐ Yes ☐ No

Deceased: ☐ Yes ☐ No, current age: _____

Natural Father resides:

9. Notarized Affidavit of Consent from Natural Father is attached:

☐ Yes ☐ No

Consent should be waived for the following reasons:

10. That the names of all adult next of Kin of said minor child(ren) are as follows:

Name:

Mailing Address:

11. In support of this Petition, I/we have attached the following:

☐ Medical Documents;

☐ Police Reports;

☐ Affidavits;

☐ Other: _____

WHEREFORE, I/we the Petitioner(s), pray that I/we be appointed as the legal guardian(s) of the minor child(ren) referenced herein, and for such other relief as the Court may deem appropriate.

Respectfully Submitted,

Signature

Mailing Address

Signature

Mailing Address

***Reminder: Affidavit's on the following 2 pages MUST be signed in front of a Notary.**

**IN THE TRIBAL COURT
PUEBLO OF LAGUNA
STATE OF NEW MEXICO**

**NATURAL FATHER'S AFFIDAVIT
OF CONSENT TO GUARDIANSHIP**

IN THE MATTER OF APPOINTMENT OF
GUARDIAN FOR THE MINOR CHILD(REN):

(Minor Child/ren)

I, _____ am the Natural Father of the above-
named child/ren, and I hereby voluntarily consent to having:

_____ (name of Petitioner)

_____ (name of Petitioner) appointed as guardian(s)
of the said minor child(ren).

Signature of Natural Father

Print Name

Address: _____

The foregoing Affidavit of Consent of the Natural Father was acknowledged, subscribed and
sworn to me before this _____ day of _____, 20 _____ by
_____, (natural father).

(SEAL)

Notary Public: _____

My commission expires on: _____

**IN THE TRIBAL COURT
PUEBLO OF LAGUNA
STATE OF NEW MEXICO**

**NATURAL MOTHER'S AFFIDAVIT
OF CONSENT TO GUARDIANSHIP**

IN THE MATTER OF:

_____,
_____,

(Minor Child/ren)

I, _____ am the Natural Mother of the above-named child/ren, and I hereby voluntarily consent to having

_____ (name of Petitioner)

_____ (name of Petitioner) appointed as guardian(s) of the said minor child(ren).

Signature of Natural Mother

Print Name

Address: _____

The foregoing Affidavit of Consent of the Natural Mother was acknowledged, subscribed and sworn to me before this _____ day of _____, 20 _____ by _____, (natural mother).

(SEAL)

Notary Public: _____

My commission expires on: _____