

EMERGENCY SHORT-TERM MINOR GUARDIANSHIP PACKET

(Includes Motion for Immediate Restraining Order)



RAYLENE KING

**Whatcom County Superior Court Clerk
311 Grand Avenue, Suite 301 - 3rd Floor
Bellingham, WA 98225**

Main: (360) 778-5637

Email: scminorguardianship@co.whatcom.wa.us

EMERGENCY PETITION

- If you are seeking a short-term minor guardianship for 60 days and/or need an immediate restraining order.

MINOR GUARDIANSHIP PETITION – CHECKLIST

- **Fill out forms #1 through #15 (#14 and #14a, if applicable),**. Call the Guardianship Facilitator Britt at (360) 778-5637 for an appointment to review your documents and open your case. There is a \$20 appointment fee, payable upon arrival.
- If you are a relative, there is no filing fee. If you are NOT a relative and cannot afford the filing fee of \$240.00, ask the Court Clerk's Office for a fee waiver (no charge).
- Bring the ***original*** completed forms to your appointment at the Superior Court Clerk's Office located at 311 Grand Avenue, Suite 301 in Bellingham.

- ☐ 1) Release of Liability & Disclaimer
- ☐ 2) Case Information Cover Sheet
- ☐ 3) Confidential Information Form
- ☐ 4) Summons
- ☐ 5) Emergency Minor Guardianship Petition
- ☐ 6) Declaration Explaining Reasons for Minor Guardianship

Important! If the children are age 12 or older, this form ***must*** be served on them unless you get a court order to withhold. If you believe it might be harmful for the children to read about the reasons, use these forms to ask the court for permission not to serve the children.

- ***Motion to Withhold Certain Documents from the Minor (form GDN M 106)***
- ***Order on Motion to Withhold Certain Documents from the Minor (form GDN M 107)***

- ☐ 7) Parent's Consent to Minor Guardianship, if applicable
 - ☐ **7a)** Acceptance of Service (for parent(s))
 - ***Make copies if there is more than one parent***

- ☐ 8) Consent of Minor (if minor is 12 years old or older and agrees to guardianship)
- *Make copies if there is more than one child 12 or older, each child will need their own consent signed.*
- ☐ 9) Motion for Order Directing DCYF to Release CPS Information
- ☐ 9a) Order Directing DCYF to Release CPS Information
- ☐ 10) JIS Background Check
- ☐ 11) Disclosure of Bankruptcy or Criminal History
- *If there are co-petitioners / spouses and additional household members, a separate history must be completed and signed.*
- ☐ 12) Washington State Patrol Criminal History WATCH Background Check (**complete conviction criminal history based on "name and date of birth" online at <http://watch.wsp.wa.gov> and attach copy of printed report to form – all must establish a new account with password**) and Coversheet (a separate WSP background check must be completed for **ALL** Petitioners and every adult living in house.)
- ☐ 13) Notice of Hearing About Emergency Minor Guardianship Petition
- *The Minor Guardianship Facilitator will give you a hearing date*

****If you need an immediate order for guardianship of the child(ren), fill out #14 and #14a****

- ☐ 14) Motion for Immediate Emergency Minor Guardianship and Restraining Order
- ☐ 14a) Immediate Order and Hearing Notice
- *The Minor Guardianship Facilitator will give you a hearing date within five court days, if the Order is granted.*
- If an *Immediate Order* is granted (#13a above) you must serve the *Motion* (#13) and *Order* (#13a) to: every parent, any child 12 or older, anyone having custody of the child(ren) and any lawyer appointed, within **48 hours** and a hearing will be held within five days.
- The Minor Guardianship Facilitator will provide you with certified *Letters of Guardianship*. They will be valid until the hearing date.
 - At the hearing held in five days, have the documents 14) Order on Emergency Minor Guardianship and 15) Acceptance of Guardianship filled out and ready to present to the Commissioner in court.
- If an *Immediate Order* was not requested or was denied, fill out the Notice of Hearing and call the Minor Guardianship Facilitator at **(360) 778-5637** to set a hearing at least 14 days out
- ☐ 15) Order on Emergency Minor Guardian

****Required Service Information****

What must be served: Summons, Emergency Minor Guardianship Petition, Reasons for Minor Guardianship, Notice of Hearing, WATCH Report, and any other declarations you filed along with the Petition.

- **See Notice of Hearing for details of who must be personally served and who must receive notice by mail or other action reasonably calculated to give notice under RCW 11.130.065**

☐ 16) Proof of Personal Service

☐ 17) Proof of Service

The Lay Guardian Training must be completed before final orders can be entered. All petitioners need to complete this training on their own and file their own declaration of completion. There is no cost for the training and it is available online. File the *Declaration of Completion of Guardian Training* in the Court Administration's Office. This document is on the same page as the training. See below. Click on "Title 11 Minor Guardianship"

<https://www.courts.wa.gov/guardianportal/index.cfm?fa=guardianportal.title11minor>

- **How to Complete the Training for a Minor's Guardian**

There are two actions that must be completed.

1. Complete the training by clicking on the link to the training below. The link is called "[Minor Lay Guardianship Online Training Module](#)"
2. After you finish the training, exit out of the training. Scroll down this page to the section called "[Declaration of Completion](#)". You will need to download the Declaration of Completion, fill it out, sign it, and file it with the court. This will show the court that you have taken the training.

Guardianship law in Washington requires that a person who will serve as a guardian learn about the duties and responsibilities of guardianship. The law that requires this training can be found here:

<https://app.leg.wa.gov/RCW/default.aspx?cite=11.130.090>

- **Declaration of Completion**

You must complete the required training before signing the Declaration of Completion. By signing you are declaring to the court that you personally

completed the training. The signed Declaration of Completion must be filed with the superior court in the guardianship case. If you are a co-guardian, you must each complete the training and sign a separate Declaration of Completion.

If not already appointed, submit the Declaration of Completion with your Minor Guardianship Petition. IF already appointed, present and file with the court within 90 days of appointment.

What languages is this training offered in?

The training is available in English and Spanish. After researching translating into other languages, it was determined that offering the training in other languages isn't financially feasible at this time.

- Fill out form #18 and bring to your hearing.
- ☐ 18) Acceptance of Appointment of Guardian

- You can pick up your "Letters of Guardianship" at the Court Clerk's Office - Will Call, in Suite 301 – 3rd floor, within two days after your hearing.

- ***This list of instructions is not a substitute for legal advice.***
- ***Before starting any legal action, it is always wise to consult an attorney regarding your rights and responsibilities.***
- ***Many attorneys offer a free initial consultation.***
- ***Your specific situation may require additional forms and procedures which may not be listed in this outline.***
- ***The Minor Guardianship Facilitator and the Court Administration's office cannot give legal advice.***
- ***Only an attorney can give legal advice.***

GUARDIANSHIP/CONSERVATORSHIP

WHATCOM COUNTY SUPERIOR COURT Case Information Cover Sheet (CICS)

Case Number _____ Case Title _____

Attorney Name _____ Bar Membership Number _____

Please check one category that best describes this case for indexing purposes. Accurate case indexing not only saves time in docketing new cases, but helps in forecasting needed judicial resources. Cause of action definitions are listed on the back of this form. Thank you for your cooperation.

- | | | |
|--------------------------|------------|--|
| <input type="checkbox"/> | EGC | Emergency Guardianship/Conservatorship |
| <input type="checkbox"/> | EMG | Emergency Minor Guardianship |
| <input type="checkbox"/> | EGM | Minor Emergency Guardianship/Conservatorship |
| <input type="checkbox"/> | GDE | Guardianship of the Estate |
| <input type="checkbox"/> | GDN | Guardianship |
| <input type="checkbox"/> | GDP | Guardianship of the Person |
| <input type="checkbox"/> | GE | Guardian/Estate |
| <input type="checkbox"/> | LGD | Limited Guardianship |
| <input type="checkbox"/> | LGE | Limited Guardianship of the Estate |
| <input type="checkbox"/> | LGP | Limited Guardianship of the Person |
| <input type="checkbox"/> | MCE | Minor Conservatorship |
| <input type="checkbox"/> | MGC | Minor Guardianship Custody |
| <input type="checkbox"/> | OPM | Minor Other Protective Arrangement |
| <input type="checkbox"/> | OPR | Other Protective Arrangement |
| <input type="checkbox"/> | SMG | Standby Minor Guardianship |

Please Note: Public information in court files and pleadings may be posted on a public Web site.

Last Updated: 05/21/2025

GUARDIANSHIP/CONSERVATORSHIP

Emergency Guardianship/Conservatorship and Minor Emergency Guardianship/Conservatorship -Emergent request to appoint a person to manage the estate or affairs of another.

Emergency Minor Guardianship-Emergent request to place a child with a guardian while Minor Guardianship Custody is pending. RCW 11.130.225

Guardianship--Petition to appoint a guardian over a person and estate to manage the affairs of another or non-resident person.

Guardianship/Estate--Petition seeking court settlement for the property of a deceased person who was the ward of a guardian.

Guardianship of the Estate – Petition to appoint a conservator over the estate to manage the affairs of another or non-resident person.

Guardianship of the Person – Petition to appoint a guardian over a person to manage the affairs of another

Limited Guardianship--Petition to appoint a limited guardian with only partial responsibility for the ward's person and property, where the ward is not fully incompetent.

Limited Guardianship of the Estate--Petition to appoint a limited guardian with only partial responsibility for the person's property, where the ward is not fully incompetent.

Limited Guardianship of the Person--Petition to appoint a limited guardian with only partial responsibility for the person, where the ward is not fully incompetent.

Minor Conservatorship--Petition is based solely on the underage status of the Minor. RCW 11.130.595

Minor Guardianship Custody-No parent willing/able to perform parenting functions. (Replaces Child Custody-2021) RCW 11.130.190

Minor Other Protective Arrangement-- Petition to appoint a special agent to perform a specific task in managing the affairs or estate of a minor. RCW 11.130.

Other Protective Arrangement –Petition to appoint a special agent to perform a specific task in managing the affairs or estate of another. RCW 11.130.

Standby Minor Guardianship-Guardian appointment for up to 2 years when no parent is willing/able to perform parenting functions. RCW 11.130.220

Confidential Information (CIF)**Clerk: Do not file in a public access file**

Superior Court of Washington, County of Whatcom

Case No.: _____

Important! Only court staff and some state agencies may see this form. The other party and his/her lawyer may not see this form unless a court order allows it. State agencies may disclose the information in this form according to their own rules.

1. Who is completing this form? (Name): _____

2. Is there a current restraining or protection order involving the parties or children? [] Yes [] No

If Yes, who does the order protect? (Name/s): _____

3. Proposed Guardian's Information

Full name (first, middle, last):		Date of birth (MM/DD/YYYY):	Sex:
Driver's license/Identicard (#, state):	Race:	Relationship to children in this case:	
Mailing address (This address will not be kept private.) (street address or PO box, city, state zip):			
Phone:		Social Security Number:	
Email:			
Home address (check one): [] same as mailing address [] listed below (street, city, state, zip):			
Employer's name:		Employer's phone:	
Employer's address:			

4. Parent 1's Information

Full name (first, middle, last):		Date of birth (MM/DD/YYYY):	Sex:
Driver's license/Identicard (#, state):	Race:	Relationship to children in this case:	
Mailing address (This address will not be kept private.) (street address or PO box, city, state zip):			
Phone:		Social Security Number:	
Email:			
Home address (check one): [] same as mailing address [] listed below (street, city, state, zip):			
Employer's name:		Employer's phone:	
Employer's address:			

5. Parent 2's Information

Full name (first, middle, last):		Date of birth (MM/DD/YYYY):	Sex:
Driver's license/Identicard (#, state):	Race:	Relationship to children in this case:	
Mailing address (This address will not be kept private.) (street address or PO box, city, state zip):			
Phone:		Social Security Number:	
Email:			
Home address (check one): <input type="checkbox"/> same as mailing address <input type="checkbox"/> listed below (street, city, state, zip):			
Employer's name:		Employer's phone:	
Employer's address:			

6. Other Party's Information – This person is a (check one): ☐ Petitioner ☐ Custodian ☐ Other: _____

Full name (first, middle, last):		Date of birth (MM/DD/YYYY):	Sex:
Driver's license/Identicard (#, state):	Race:	Relationship to children in this case:	
Mailing address (This address will not be kept private.) (street address or PO box, city, state zip):			
Phone:			
Email:			

7. Children's Information

Child's full name (first, middle, last)	Date of birth (MM/DD/YYYY)	Race	Sex	Current location: lives with
1.				<input type="checkbox"/> Petitioner <input type="checkbox"/> other: _____
2.				<input type="checkbox"/> Petitioner <input type="checkbox"/> other: _____
3.				<input type="checkbox"/> Petitioner <input type="checkbox"/> other: _____
4.				<input type="checkbox"/> Petitioner <input type="checkbox"/> other: _____

8. Have the children lived with anyone other than Petitioner or Other Party during the last five years? (Check one): ☐ No ☐ Yes If Yes, fill out below:

Children lived with (name)	That person's current address
1.	
2.	

9. Do other people (not parents) have custody or visitation rights to the children?

(Check one): ☐ No ☐ Yes If **Yes**, fill out below:

Person with rights (name)	That person's current address
1.	
2.	

10. If you are asking for custody and are not the parent, list all other adults living in your home:

1. (Name):	Date of birth (MM/DD/YYYY):
2. (Name):	Date of birth (MM/DD/YYYY):

I declare under penalty of perjury under Washington State law that the information on this form about me is true. The information about others is the best information I have or is unavailable because (*explain*):

Signed at (*city and state*): _____ Date: _____



Petitioner/Other Party signs here

Print name here

Superior Court of Washington, County of Whatcom

In the Guardianship of:

Case No. _____

Respondent/s (*minors/children*)

**Summons
(SM)**

Use this form with Notice of Hearing About a Minor Guardianship Petition (GDN M 101) and Minor Guardianship Petition (GDN M 102).

Summons

To: The parents, child, and person with court-ordered custody:

1. The Petitioner has started a case asking for guardianship of the above-named children under RCW 11.130.185. If the *Minor Guardianship Petition* is approved, the rights of the parents or legal custodians could be substantially restricted.
2. You must **respond** to this Summons and Petition by serving a copy of your written response on the person signing this Summons, any other party, and by filing the original response with the Clerk of the Court.

If you do not serve your written response within **20 days** after the date this Summons was served on you (or 60 days if you are served outside of the state of Washington), exclusive of the day of service, the court may enter an order of default against you and the court may, without further notice to you, enter an order and approve or provide for the relief requested in the Petition.

If the Petition has not been filed, you may demand that the Petitioner file this lawsuit with the court. If you do so, the demand must be in writing and must be served upon the person signing this Summons. Within 14 days after you serve the demand, the Petitioner must file this lawsuit with the court, or the service on you of this Summons and Petition will be void.

3. If you wish to seek the advice of a lawyer in this matter, you should do so promptly so that your written response, if any, may be served on time.
4. This Summons is issued pursuant to Rule 4 of the Superior Court Civil Rules of the State of Washington.

Important! Read the Notice of Hearing for information about your rights and how to respond.

Dated: _____

Signature of Petitioner or Lawyer/WSBA No.

Print or Type Name

***File original of your response with
the clerk of the court at:***

Serve a copy of your response on:

☐ Petitioner
*(You may list an address that is not your residential
address where you agree to accept legal documents.)*

☐ Petitioner's Lawyer

Whatcom County Superior Court Clerk's Office
Name of Court

Name

311 Grand Avenue, Suite 301 – 3rd Floor
Address

Address

Bellingham, WA 98225

Superior Court of Washington, County of _____

In the Guardianship of: _____

Respondent/s (*minors/children*) _____

No. _____

**Emergency Minor Guardianship
Petition (short-term)**

(PTAPEMG)

☐ Clerk's Action Required: **6**

☐ No Fee: **23**

Emergency Minor Guardianship Petition (short-term)

Do not use this form if you are filing a *Petition for Minor Guardianship* (GDN M 102).

Use this form to appoint an emergency guardian if you only need guardianship for **60 days or less**. If you need the guardianship to last longer than 60 days, you should file a *Minor Guardianship Petition* instead (form GDN M 102).

A child or an interested party may file the Petition. Use this form together with:

- *Notice of Hearing for Emergency Minor Guardianship Petition* (form GDN M 201)
- *Criminal History Cover Sheet* (form GDN M 407)
- *Motion and Order to DCYF to Release CPS Information* (form GDN M 404 and form GDN M 405)

If needed:

- *Motion for Immediate Order (Ex Parte) – Emergency Minor Guardianship and Restraining Order* (form GDN M 204)
- *Immediate Order (Ex Parte) and Hearing Notice – Emergency Minor Guardianship and Restraining Order* (form GDN M 205)

1. Emergency Guardianship Request.

I ask the court to appoint an emergency guardian for the children (*under age 18*) listed in section **2** who have the same legal parents.

2. **Children.**

Child's Name	Age	Child's Name	Age
1.		2.	
3.		4.	

Important! Do not list more than one child unless they have all the same parents. If they have different parents, fill out a separate Petition for each child.

County – I am filing in this county because (*check all that apply*):

☐ the children live here or are present in this county now.

☐ there is another case involving custody or parental rights already in progress in this county.

Lawyer for children – The children (*check one*):

☐ do **not** have a lawyer.

☐ are represented by (*lawyer's name*): _____

Lawyer's address: _____

3. **Petitioner/s.**

My name is: _____

☐ I am the child seeking a guardian.

☐ I am interested in the welfare of the children. My relationship to the children in this case: _____

My home address (principal residence): _____

My street address (if different): _____

☐ **Co-Petitioner** (*If there is another Petitioner in this case*)

My name is: _____. I am interested in the welfare of the children.

My relationship to the children in this case: _____

My home address (principal residence): _____

My street address (if different): _____

4. Who should be emergency guardian?

☐ I ask the court to appoint me (and any Co-Petitioner) emergency guardian(s) of the children.

☐ I ask the court to appoint (name/s): _____
emergency guardian of the children.

Proposed guardian's address: _____

5. Lay Guardian Training.

Complete lay guardian training at

<https://www.courts.wa.gov/guardianportal/index.cfm?fa=guardianportal.title11minor>

The proposed emergency guardian:

☐ has completed the lay guardian training.

☐ will complete the lay guardian training before the final order is entered.

☐ asks the court **not** to require lay guardian training. The proposed emergency guardian is not seeking a regular minor guardianship that will last longer than the emergency.

6. Why do the children need an emergency guardian?

Appointment of an emergency guardian is likely to prevent substantial harm to the children's health, safety, or welfare AND no one else appears to have the authority, ability, and willingness to act to prevent the harm.

Explain the risk of harm: _____

(Attach additional pages if necessary)

Explain why no one else has the authority, ability, or willingness to act: _____

(Attach additional pages if necessary)

➤ **People.**

7. Parents.

- ☐ All parental rights have been terminated.
- ☐ The children's legal parents are listed below:

Parent 1 (Name): _____

☐ Parent 1 is deceased.

☐ Parent 1 has a lawyer.

Lawyer's name: _____

Lawyer's address: _____

Parent 2 (Name): _____

☐ Parent 2 is deceased.

☐ Parent 2 has a lawyer.

Lawyer's name: _____

Lawyer's address: _____

8. Who must be served?

I will have a copy of this *Petition* and the *Notice of Hearing for Emergency Minor Guardianship Petition* **served** on the parents and anyone who fits one of the categories below. (*Check all that apply*)

- ☐ Someone other than a parent has custody or care of the children.

(Name): _____

- ☐ One or more of the children is age 12 or older.

(Name/s): _____

- ☐ Any court-appointed lawyer for a parent or the children.

- ☐ No one fits the categories above.

9. Addresses Attached to Notice of Hearing.

I have included addresses for the people in Sections 7 and 8, if known, on the *Notice of Hearing for Emergency Minor Guardianship Petition and Notice Attachment: List of People to be Served or Given Notice*. The *Notice* and *Attachment* are made part of this Petition (incorporated by reference).

➤ **Jurisdiction.**

10. Personal Jurisdiction Over Parents.

Fill out below to say if a Washington State court has personal jurisdiction (authority to make decisions) over each parent.

Basis for Personal Jurisdiction (check all that apply)	Parent 1 Name:	Parent 2 Name:
Will be served in Washington	[]	[]
Lives in Washington now	[]	[]
Lived in Washington with child	[]	[]
Lived in Washington and paid pregnancy costs or support for child	[]	[]
Caused child to live in Washington	[]	[]
Had sex in Washington that may have produced the child	[]	[]
Agrees to Washington deciding	[]	[]
None of the above	[]	[]

11. Children's Home/s.

During the past 5 years, have any of the children lived:

- on an Indian reservation,
- outside Washington state,
- in a foreign country, or
- with anyone other than a parent?

[] No. (Skip to 12.)

[] Yes. (Fill out below to show where each child has lived during the last 5 years.)

Dates	Children	Lived with	In which state, Indian reservation, or foreign country
From: To:	[] All children [] (Name/s):	[] Petitioner/s [] Parent/s (name/s): [] Other (name):	
From: To:	[] All children [] (Name/s):	[] Petitioner/s [] Parent/s (name/s): [] Other (name):	
From: To:	[] All children [] (Name/s):	[] Petitioner/s [] Parent/s (name/s): [] Other (name):	

12. Other people with a legal right to spend time with a child.

Do you know of anyone besides you and the parents who has, or claims to have, a legal right to spend time with any of these children?

(Check one): [] No. (Skip to 13.) [] Yes. (Fill out below.)

Name of person	Children this person may have the right to spend time with
	<input type="checkbox"/> All children <input type="checkbox"/> (Name/s):
	<input type="checkbox"/> All children <input type="checkbox"/> (Name/s):

13. Other court cases involving a child.

Do you know of any court cases involving any of these children?

(Check one): ☐ No. (Skip to **14**.) ☐ Yes. (Fill out below.)

Kind of case (Family Law, Criminal, Protection Order, Juvenile, Dependency, Other)	County and State	Case number and year	Children
			<input type="checkbox"/> All children <input type="checkbox"/> (Name/s):
			<input type="checkbox"/> All children <input type="checkbox"/> (Name/s):
			<input type="checkbox"/> All children <input type="checkbox"/> (Name/s):
			<input type="checkbox"/> All children <input type="checkbox"/> (Name/s):

14. Tribal Heritage.

If there is a reason to know that a child has **tribal heritage** (including ancestry or familial political affiliation), the court must treat the child as an Indian child unless and until the affected tribe/s decide otherwise or decline to respond after receiving proper notice.

An **Indian child** is a child who is a member of an Indian tribe, or who is the biological child of an Indian tribe member and eligible for membership. You must try to find out if any child in this case is an Indian child. If so, the federal and state Indian Child Welfare Acts will apply to your case.

Could any of the children be Indian children? (Check all that apply):

☐ **No.**

These children are not Indian children (name/s, or "all"): _____

I know this because (explain if the children have no tribal heritage, or if any possible tribal heritage has already been explored and decided in another court proceeding that complied with ICWA): _____

- ☐ **Yes or Maybe.** These children are or may be Indian children. They have or may have heritage from the tribe/s listed below:

Children	Tribe
<input type="checkbox"/> All children	
<input type="checkbox"/> (Name/s):	
<input type="checkbox"/> All children	
<input type="checkbox"/> (Name/s):	

I will provide the *Indian Child Welfare Act Notice* (form GDN M 401) and a copy of this *Petition* to the tribe/s named above and other necessary people or agencies.

- ☐ **I do not know** if any of the children are Indian children or have tribal heritage. I have done the following things to try to find out:

15. Jurisdiction Over Indian Children.

- ☐ Does not apply. None of the children are Indian children.
- ☐ A state court can decide this case for the Indian children because:
- ☐ (Children's names): _____ are **not** domiciled or living on an Indian reservation, and are not wards of a tribal court. (25 USC §1911)
- ☐ (Children's names): _____ **are** domiciled or living on an Indian reservation, and (check all that apply):
- ☐ The children's tribe agrees to Washington State's concurrent jurisdiction.
- ☐ The children's tribe decided not to use its exclusive jurisdiction (expressly declined). (RCW 13.38.060)
- ☐ Washington State should claim emergency jurisdiction for children temporarily located off the reservation to protect the children from immediate physical damage or harm. (RCW 13.38.140)

16. Jurisdiction Over the Children (RCW 26.27.201 – .221, .231, .261, .271).

This Court can decide this case for the children because (check all that apply; if a box applies to all of the children, you may write "the children" instead of listing names):

- ☐ **Exclusive, continuing jurisdiction** – A Washington court has already made a custody order or parenting plan for the children, and the court still has authority to make other orders for (children's names): _____
- ☐ **Home state jurisdiction** – Washington is the children's home state because (check all that apply):
- ☐ (Children's names): _____ lived in Washington with a parent, or someone acting as a parent, for at least the 6 months just before this case was filed or, if the children are less than

6 months old, they have lived in Washington with a parent, or someone acting as a parent, since birth.

[] There were times the children were not in Washington in the 6 months just before this case was filed (or since birth if they are less than 6 months old), but those were temporary absences.

[] *(Children's names)*: _____ do not live in Washington right now, but Washington was the children's home state sometime in the 6 months just before this case was filed, and a parent, or someone acting as a parent of the children, still lives in Washington.

[] *(Children's names)*: _____ do not have another home state.

[] **No home state or home state declined** – No court of any other state (or tribe) has the jurisdiction to make decisions for *(children's names)*: _____ or a court in the children's home state (or tribe) decided it is better to have this case in Washington **and**:

- The children and a parent, or someone acting as a parent, have ties to Washington beyond just living here; **and**
- There is a lot of information (substantial evidence) about the children's care, protection, education, and relationships in this state.

[] **Other state declined** – The courts in other states (or tribes) that might be *(children's names)*: _____'s home state have refused to take this case because it is better to have this case in Washington.

[] **Temporary emergency jurisdiction** – The court can make decisions for *(children's names)*: _____ because the children are in this state now **and** were abandoned here **or** need emergency protection because the children (or the children's parent or siblings) were abused or threatened with abuse. (*Check one*):

[] A custody case involving the children was filed in the children's home state (*name of state or tribe*): _____. Washington should take temporary emergency jurisdiction over the children until the Petitioner can get a court order from the children's home state (or tribe).

[] There is **no** valid custody order or open custody case in the children's home state (*name of state or tribe*): _____. If no case is filed in the children's home state (or tribe) by the time the children have been in Washington for 6 months, (*date*): _____, Washington should have final jurisdiction over the children.

[] **Other reason (specify)**: _____

➤ **Additional Requests.**

17. Parents' Visitation.

I ask the court to order the following contact or visitation between the parents and children:

I ask for this because (*explain why*) _____

18. Decision-making Authority.

I ask the court to make the following orders about who has the right to make decisions for the children:

Type of Major Decision	Guardian Decides	Parent/s Decide (<i>write one parent's name or "both"</i>)
School/educational	<input type="checkbox"/>	<input type="checkbox"/>
Healthcare (not emergency)	<input type="checkbox"/>	<input type="checkbox"/>
Authority to apply for passport and travel internationally	<input type="checkbox"/>	<input type="checkbox"/>
Driver's license or State I.D.	<input type="checkbox"/>	<input type="checkbox"/>
Passport:	<input type="checkbox"/>	<input type="checkbox"/>
Social Security:	<input type="checkbox"/>	<input type="checkbox"/>
Vital Statistics:	<input type="checkbox"/>	<input type="checkbox"/>
Administration Records:	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>

19. Access to Records.

I ask the court to make the following orders about who has the right to access these types of records for the children:

Type of Record	Guardian Can Access	Parent/s Can Access (<i>write one parent's name or "both"</i>)
School/educational	<input type="checkbox"/>	<input type="checkbox"/>
Healthcare	<input type="checkbox"/>	<input type="checkbox"/>
Social Security:	<input type="checkbox"/>	<input type="checkbox"/>
Vital Statistics:	<input type="checkbox"/>	<input type="checkbox"/>
Administration Records:	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>

☐ Other: _____

20. Child Support.

The children have a right to child support (including medical support) from the legal parents, according to state law. The emergency guardian may ask the Division of Child Support or the court to order temporary child support.

Support – I ask the court to order the parents to (*check all that apply*):

- ☐ pay child support according to the *Child Support Schedule Worksheets*.
- ☐ provide and keep health insurance for the children.
- ☐ pay children's daycare, uninsured medical, or other expenses.
- ☐ no request.

Tax Issues – I ask the court to order:

- ☐ Petitioners have the right to claim the children as dependents for purposes of personal tax exemptions and associated tax credits on their tax forms.
- ☐ (*other*): _____

21. Protection Order.

Do you want the court to issue an *Order for Protection*?

- ☐ **No.** I do not want an *Order for Protection*.
- ☐ **Yes.** (*You must file a Petition for Protection Order form PO 001. You must file your Petition for Protection Order as a **separate case**. Ask the court clerk to relate (link) the protection order case together with this emergency guardianship case.*)

Important! If you need protection **now**, ask the court clerk about getting a Temporary Protection Order.

- ☐ **There already is a *Protection Order* between (name):** _____ **and me.**

Court that issued the order: _____

Case number: _____

Expiration date: _____

22. Temporary Restraining Order.

Do you want the court to issue a *Temporary Restraining Order*?

- ☐ **No.** (*Skip to 23.*)
- ☐ **Yes.** *Check the type of orders you want:*

- ☐ **Do not disturb** – Order (name/s) _____
not to disturb my peace or the peace of any child listed in 2.

- ☐ **Stay away** – Order (name/s) _____
not to go onto the grounds of or enter my home, workplace, or school, and the daycare or school of any child listed in 2.

- ☐ Also, to not knowingly go or stay within _____ feet of my home, workplace, or school, and the daycare or school of any child listed in 2.

Important! Violation of a Temporary Restraining Order in a guardianship case is **not** a crime and may not be enforced by law enforcement. It can be enforced through the civil contempt process in court.

23. Fees and Costs.

Filing Fee – In some situations the court will **not** charge a fee for filing this case.

- Relatives will not be charged a filing fee.
- Non-relatives who have low income can ask the court to waive the fee. (Use forms GR 34.0100, 34.0300, and 34.0500).

☐ No request.

☐ No fee shall be charged because the proposed guardian is a relative of the children, **not** a professional guardian.

☐ Order who should pay for court costs, Guardian ad Litem fees, Court Visitor fees, lawyer fees, and other reasonable fees.

24. Other Requests, if any.

Petitioner fills out below:

I declare, under penalty of perjury under the laws of the State of Washington, that the facts I have provided on this form (including any attachments) are true. ☐ I have attached (#): _____ pages.

Signed at (city and state): _____ Date: _____



Petitioner signs here

Print Name

My contact information is:

Email: _____ Phone (Optional): _____

Co-Petitioner (if any) fills out below:

I declare, under penalty of perjury under the laws of the State of Washington, that the facts I have provided on this form are true.

Signed at (city and state): _____ Date: _____



Other Petitioner signs here

Print Name

My contact information is:

Email: _____ Phone (Optional): _____

Petitioner's Lawyer (if any) fills out below:



Petitioner's Lawyer signs here

Print Name and WSBA No.

Date

Superior Court of Washington, County of Whatcom

In the Guardianship of:

Case No. _____

Minor/s _____

**Declaration Explaining the Reasons for
Minor Guardianship Petition
(DCLR)**

**Declaration Explaining the Reasons for
Minor Guardianship**

Use this form to explain the reasons why you asked for Minor Guardianship, why the court should appoint the person you propose as guardian, and (if applicable) why the parents' contact should be limited. Use this form together with:

- Minor Guardianship Petition (form GDN M 102)
- Minor Standby Guardianship Petition

Important! If the children are age 12 or older, this form **must** be served on them unless you get a court order to withhold. If you believe it might be harmful for the children to read about the reasons, use these forms to ask the court for permission **not** to serve the children.

- Motion to Withhold Certain Documents from the Minor (form GDN M 106)
- Order on Motion to Withhold Certain Documents from the Minor (form GDN M 107)

1. Why do the children need a guardian?

Parent 1 (Name): _____:

- ☐ consented, after being fully informed of the nature and consequences of guardianship.
- ☐ had their parental rights terminated.
- ☐ is **not** willing or able to provide for the support, care, education, health, safety, and welfare of a child under age 18 (exercise the parenting functions in RCW 26.09.004). This is true because *(explain and give examples)*:

Parent 2 (Name): _____ :

- ☐ consented, after being fully informed of the nature and consequences of guardianship.
- ☐ had their parental rights terminated.
- ☐ is **not** willing or able to provide for the support, care, education, health, safety, and welfare of a child under age 18 (exercise the parenting functions in RCW 26.09.004). This is true because *(explain and give examples)*:

2. Children's best interests

It is in the best interests of the children to appoint a guardian because *(explain how having a guardian would be good for the children)*:

3. Why the person I propose should be guardian

(Name/s of proposed guardian/s): _____
should be appointed guardian because (explain why this person is the best choice):

4. Should parent/s contact be limited?

☐ No.

☐ Yes. I ask the court to give **limited or no visitation** because the following reasons for limiting visitation apply:

☐ Mandatory limiting factors from RCW 26.09.191(2). A parent has one or more of these problems, as follows (check all that apply):

☐ **Abandonment** – (Parent's name): _____
intentionally abandoned a child listed in **2** for an extended time.

☐ **Neglect** – (Parent's name): _____
substantially refused to perform his/her parenting duties for a child listed in **2**.

☐ **Child Abuse** – (Parent's name): _____
(or someone living in that parent's home) abused or threatened to abuse a child. The abuse was (check all that apply):
☐ physical ☐ sexual ☐ repeated emotional abuse.

☐ **Domestic Violence** – (Parent's name): _____
(or someone living in that parent's home) has a history of domestic violence as defined in RCW 26.50.010.

☐ **Assault** – (Parent's name): _____
(or someone living in that parent's home) has assaulted or sexually assaulted someone causing grievous physical harm, causing fear of such harm, or resulting in a pregnancy.

☐ **Sex Offense –**

☐ *(Parent's name):* _____
has been convicted of a sex offense as an adult.

☐ Someone living in *(parent's name):* _____'s home has
been convicted as an adult or adjudicated as a juvenile of a sex offense.

☐ Other limiting factors from RCW 26.09.191(3) – A parent has one or more of
these problems as follows *(check all that apply)*:

☐ **Neglect –** *(Parent's name):* _____
neglected his/her parental duties towards a child listed in **2**.

☐ **Emotional or physical problem –** *(Parent's name):* _____
has a long-term emotional or physical problem that gets in the way of his/her
ability to parent.

☐ **Substance Abuse –** *(Parent's name):* _____
has a long-term problem with drugs, alcohol, or other substances that gets in
the way of his/her ability to parent.

☐ **Lack of emotional ties –** *(Parent's name):* _____
has few or no emotional ties with a child listed in **2**.

☐ **Abusive use of conflict –** *(Parent's name):* _____
uses conflict in a way that endangers or damages the psychological
development of a child listed in **2**.

☐ **Withholding the child –** *(Parent's name):* _____
has kept the other parent away from a child listed in **2** for a long time, without
a good reason.

☐ **Other (specify):** _____

Explain and give examples for each limiting factor, if not already covered above:

Petitioner fills out below:

I declare under penalty of perjury under the laws of the state of Washington that the facts I have
provided on this form (and any attachments) are true. ☐ I have attached *(number)*: _____ pages.

Signed at *(city and state)*: _____ Date: _____

▶ _____
Petitioner signs here *Print name*

Co-Petitioner (if any) fills out below:

I declare under penalty of perjury under the laws of the State of Washington that the facts I have provided on this form are true.

Signed at (*city and state*): _____ Date: _____



Co-Petitioner signs here

Print name

Warning! Documents filed with the court are available for anyone to see unless they are sealed. Financial, medical, and confidential reports, as described in General Rule 22, **must** be sealed so they can only be seen by the court, the other party, and the lawyers in your case. Seal those documents by filing them separately, using a *Sealed Cover Sheet* (form GDN ALL 001). You may ask for an order to seal other documents

Superior Court of Washington, County of Whatcom

In the Guardianship of:

Case No. _____

Minor/s

**Parent's Consent to Minor Guardianship
(CON)**

**Parent's Consent to Minor Guardianship
(each parent must complete separate forms)**

*Use this form to agree to Minor Guardianship. Do **not** use this form for Standby or Emergency Guardianship.*

1. Parent

My name is _____. I am a legal parent of the children named above.

2. Guardian

I agree (consent) that the court can appoint (name/s) _____ as guardian for my children.

3. Powers

I have read the *Minor Guardianship Petition*. I agree the court should give the guardian the powers requested in the petition. The petition covers:

- Custody
- Visitation
- Decision-Making Authority
- Access to Records
- Child Support, Insurance, and Taxes
- Protection Orders and Restraining Orders
- Fees and Costs
- Other Requests

4. Voluntary

I do **not** have to agree to this guardianship. I have a legal right to raise my children (unless a court has already limited that right).

5. Lawyer

I understand that I have the right to seek legal advice. If I need help understanding this consent or do **not** agree to a guardian, I can talk to a lawyer.

If I do **not** agree and cannot afford a lawyer, I have the right to have a lawyer appointed to represent me at public expense. (GDN ALL 021, *Motion to Appoint Lawyer.*)

6. Legal Proceeding

I understand that if I do **not** agree, I have the right to a full legal proceeding about guardianship. In a full proceeding, the court must presume I am willing and able to parent. For the Petitioner to succeed, they must prove I am **not** able or willing to parent.

I agree to the guardian being appointed for my children without a full legal proceeding.

7. Termination

I understand that once the court has approved the guardianship, if I want it to end before it expires (usually age 18), I will have to petition the court. (*Use Petition to Terminate or Change Minor Guardianship or Non-Parent Custody Order form GDN M 502*) If the guardian does not agree, they will have to prove:

- Ending the guardianship would be harmful to the children; and
- The children's interest in continuing the guardianship outweighs my parental rights.

8. Acceptance of Service

☐ Does not apply.

☐ I have received a copy of the *Minor Guardianship Petition* and accept service.

☐ I do not need to be notified about the court's hearings or decisions in this case.

☐ I ask the Petitioner to notify me about any hearings in this case. (*List an address where you agree to accept legal documents. This may be a lawyer's address or any other address.*)

Address	City	State	Zip
E-mail: 			

I understand the nature and consequences of a minor guardianship. I agree the court can appoint the guardian named above for my children.

▶		
Parent signs here	Print name	Date

Lawyer Certification (optional)

I am the lawyer for the above-named parent. I have reviewed this Parental Consent with my client. I explained to my client the nature of the proposed guardianship and the consequences of agreeing to the guardianship.

My client has indicated to me they understand the nature and consequences, and still wish to consent to the guardianship.

▶		
Parent's lawyer (if any) signs here	Print name and WSBA No.	Date

Superior Court of Washington, County of Whatcom

In the Guardianship of:

Minor/s _____

Case No.: _____

**Service Accepted
(ACSR)**

Service Accepted

- 1.** I am (name): _____. I accept service of the following documents (check all that apply):

(The most common documents are listed below. Check only those documents that were served. Use the "Other" boxes to write in the title of each document served that is not already listed.)

<input type="checkbox"/>	Emergency Minor Guardianship Petition
<input type="checkbox"/>	Summons
<input type="checkbox"/>	Declaration Explaining Reasons for Minor Guardianship
<input type="checkbox"/>	Motion for Immediate Order (Ex-Parte) - Emergency Minor Guardianship and Restraining Order
<input type="checkbox"/>	Immediate Order (Ex-Parte) and Hearing Notice - Emergency Minor Guardianship and Restraining Order
<input type="checkbox"/>	WATCH Report
<input type="checkbox"/>	Notice of Hearing about Emergency Minor Guardianship Petition
<input type="checkbox"/>	Declaration of: _____
<input type="checkbox"/>	Declaration of: _____
<input type="checkbox"/>	Other: _____

☐ Other: _____

2. Personal Jurisdiction (*check one*):

- ☐ I **agree** this court has jurisdiction over me (or my client) for this case.
☐ I **do not agree** this court has jurisdiction over me (or my client) for this case because:

Signing this form means you agree that you have *received* the court papers for this case. It does not mean that you *agree* with the papers.

If you sign below, you must also list an address where you agree to accept legal papers for this case. This may be an attorney's address or any other address.

▶ _____
Sign here *Print name (if attorney, also provide WSBA #) Date*

street address or P.O. box *city* *state* *zip*

(Optional) email: _____

*(If this address changes before the case ends, you **must** notify all parties and the court clerk in writing. You should file the Notice of Address Change form (FL All Family 120). You must also update your Confidential Information form (FL All Family 001) if this case involves parentage or child support.)*

☐ I am the attorney for (*name*): _____

Superior Court of Washington, County of Whatcom

In the Minor Guardianship of:

Minor/s

Case No.: _____

Consent of Minor

MINOR'S CONSENT TO GUARDIANSHIP

1. **Minor.** My name is _____. I am the minor child subject to a guardianship in this matter. I am the age of twelve (12) or older.
2. **Guardian.** I agree (consent) that the Court can appoint _____ as my guardian.
3. **Powers.** I have read the Minor Guardianship Petition. I agree the Court should give the guardian the powers requested in the Petition. The Petition covers:
 - a. Custody
 - b. Visitation
 - c. Decision-Making Authority
 - d. Access to Records
 - e. Insurance and Taxes
 - f. Other Requests.
4. **Voluntary.** I do agree to this Guardianship.
5. **Lawyer.** I understand I have the right to seek legal advice, and the right to have legal counsel appointed to help me understand the legal process. I decline to exercise this right at this time.
6. **Legal Proceeding.** I understand I have the right to request a full legal proceeding in this matter. I decline to exercise this right at this time.

Superior Court of Washington, County of Whatcom

In the Guardianship of:

Case No. _____

Respondent/s (*minors/children*)

**Motion for Order Directing DCYF to
Release CPS Information
(MT)**

Motion for Order Directing DCYF to Release CPS Information

1. Petitioner/s filed a *Minor Guardianship Petition* and request(s) an *Order* directing the Department of Children, Youth, and Families (DCYF) to release Child Protective Services (CPS) information about the proposed guardian and all household members named in the *Order*.
2. An *Order* directing DCYF to release CPS information is needed because of the following requirements:

RCW 11.130.210(1) provides that, before entering a final order, the court must:
"Direct the department of children, youth, and families to release information as provided under RCW 13.50.100."

RCW 13.50.100(4)(a) allows DCYF to release CPS information to a family or juvenile court hearing a petition under Chapter 11.130 RCW about investigations in which the proposed guardian/s, or any person age 16 or older who lives with the proposed guardian/s, is the subject of a founded or currently pending CPS investigation by the Department of Social and Health Services or DCYF started after October 1, 1998, AND the following:

☒ [X] investigations in which the children involved in this case were alleged victims of abandonment, abuse, or neglect.

Person making this motion fills out below.

▶ _____
Person making this motion signs here

Print Name (if lawyer, also list WSBA#)

Date

Superior Court of Washington, County of Whatcom

In the Guardianship of:

Case No. _____

Respondent/s (*minors/children*)

**Order Directing DCYF to Release CPS
Information**

(ORDINFO)

Clerk's Action Required: 5

**Order Directing DCYF to Release CPS Information
(Guardianship)**

1. Petitioner/s filed a *Minor Guardianship Petition*. The court needs information from the Department of Children, Youth, and Families (DCYF).
2. The court orders DCYF to provide information as allowed by RCW 13.50.100 about investigations in which the proposed guardian/s, or any person age 16 or older who lives with the proposed guardian/s, is the subject of a founded or currently pending CPS investigation by the Department of Social and Health Services or DCYF started after October 1, 1998, AND the following:

[X] investigations in which the children involved in this case were alleged victims of abandonment, abuse, or neglect; for whom a Prior Involvement Report shall be generated;

DCYF must provide this information under a *Sealed CPS Information* cover sheet (form GDN M 406) to the court at this address:

Superior Court Clerk, Whatcom County

311 Grand Avenue, Suite 301 Bellingham, WA 98225
Address City State Zip

DCYF must provide the information by (*date*): _____ or
within a reasonable amount of time if no date is specified.

3. List the children:

Child's name	DOB (MM/DD/YYYY)	Child's name	DOB (MM/DD/YYYY)
1.			
3.			

4. List the proposed guardian/s and anyone 16 or older living in the home:

Proposed Guardian

Full Name: _____

Also Known As: _____

Birthdate: _____

Other Individual in the Home

Full Name: _____

Also Known As: _____

Birthdate: _____

Other Individual in the Home

Full Name: _____

Also Known As: _____

Birthdate: _____

Other Proposed Guardian

Full Name: _____

Also Known As: _____

Birthdate: _____

Other Individual in the Home

Full Name: _____

Also Known As: _____

Birthdate: _____

Other Individual in the Home

Full Name: _____

Also Known As: _____

Birthdate: _____

5. **Clerk's Action:** The clerk shall forward a copy of this order to DCYF. Information received from DCYF in response to this order must be filed under seal. Only the parties in this case, their lawyers, the Guardian ad Litem (if any), and the person whose information was released, may have access to this information.

Other: _____

6. The information DCYF provides in response to this order is confidential. Anyone who sees the information must keep it confidential and protect against unauthorized disclosure.

Ordered.

Date

Judge or Commissioner

Petitioner and Respondent/s or their lawyers fill out below.

Presented by:

Signature of Party/Lawyer

Printed Name

WSBA No.

Copy received and approved by:

Signature of Party/Lawyer

Printed Name

Signature of GAL or CV

Printed Name

SUPERIOR COURT OF THE STATE OF WASHINGTON FOR WHATCOM COUNTY

In the Guardianship of: _____ Minor/s	Case No. _____ Sealed Cover Sheet for JIS Background Check *Clerk's Action Required:
---	--

Attached is a JIS Background Check for **the Petitioner/s, the Respondent/s, the minor child(ren), other minor child(ren), and adult persons in the minor's household based on the following information provided by the Petitioner, the Respondent, or legal counsel.** Pursuant to WACSPR 98.16(d)(6)(c)(iii) JIS Background Checks, effective 09/01/22. Use additional forms, if necessary, for additional children or adults.

Submitted by: _____ Date _____

Submitted by: _____ Date _____

Received by: _____ Date _____

CHILD(REN) INFORMATION	
Child's FULL Name (Last, First MI):	Child's FULL Name (Last, First MI):
Child's Date of Birth (MO/DAY/YEAR):	Child's Date of Birth (MO/DAY/YEAR):
Child's CURRENT Address:	Child's CURRENT Address:

CHILD(REN) INFORMATION	
Child's FULL Name (Last, First MI):	Child's FULL Name (Last, First MI):
Child's Date of Birth (MO/DAY/YEAR):	Child's Date of Birth (MO/DAY/YEAR):
Child's CURRENT Address:	Child's CURRENT Address:

PETITIONER'S / PROPOSED GUARDIAN'S INFORMATION			
1st Petitioner's FULL Name (Last, First MI):		2nd Petitioner's FULL Name (Last, First MI):	
Has the 1st Petitioner ever been known by another name? <u>Including hyphenated or maiden names.</u> If so, list name(s):		Has the 2nd Petitioner ever been known by another name? <u>Including hyphenated or maiden names.</u> If so, list name(s):	
1st Petitioner's Social Security Number (last four digits, only):		2nd Petitioner's Social Security Number (last four digits, only):	
1st Petitioner's Date of Birth (MO/DAY/YEAR):		2nd Petitioner's Date of Birth (MO/DAY/YEAR):	
COURT USE ONLY		COURT USE ONLY	
JIS/JABS Checked <input type="checkbox"/>	Checks attached <input type="checkbox"/>	JIS/JABS Checked <input type="checkbox"/>	Checks attached <input type="checkbox"/>
SCOMIS Checked <input type="checkbox"/>	No information <input type="checkbox"/>	SCOMIS Checked <input type="checkbox"/>	No information <input type="checkbox"/>

RESPONDENT'S / PARENT'S INFORMATION			
1st Respondent's FULL Name (Last, First MI):		2nd Respondent's FULL Name (Last, First MI):	
Has the 1st Respondent ever been known by another name? <u>Including hyphenated or maiden names.</u> If so, list name(s):		Has the 2nd Respondent ever been known by another name? <u>Including hyphenated or maiden names.</u> If so, list name(s):	
1st Respondent's Social Security Number (last four digits, only):		2nd Respondent's Social Security Number (last four digits, only):	
1st Respondent's Date of Birth (MO/DAY/YEAR):		2nd Respondent's Date of Birth (MO/DAY/YEAR):	
COURT USE ONLY		COURT USE ONLY	
JIS/JABS Checked <input type="checkbox"/>	Checks attached <input type="checkbox"/>	JIS/JABS Checked <input type="checkbox"/>	Checks attached <input type="checkbox"/>
SCOMIS Checked <input type="checkbox"/>	No information <input type="checkbox"/>	SCOMIS Checked <input type="checkbox"/>	No information <input type="checkbox"/>

ALL OTHER MINORS OR ADULTS RESIDING WITH CHILD(REN)			
1st Other's FULL Name (Last, First MI):		2nd Other's FULL Name (Last, First MI):	
Has the 1st Other ever been known by another name? <u>Including hyphenated or maiden names.</u> If so, list name(s):		Has the 2nd Other ever been known by another name? <u>Including hyphenated or maiden names.</u> If so, list name(s):	
1st Other's Social Security Number (last four digits, only):		2nd Other's Social Security Number (last four digits, only):	
1st Other's Date of Birth (MO/DAY/YEAR):		2nd Other's Date of Birth (MO/DAY/YEAR):	
COURT USE ONLY		COURT USE ONLY	
JIS/JABS Checked <input type="checkbox"/>	Checks attached <input type="checkbox"/>	JIS/JABS Checked <input type="checkbox"/>	Checks attached <input type="checkbox"/>
SCOMIS Checked <input type="checkbox"/>	No information <input type="checkbox"/>	SCOMIS Checked <input type="checkbox"/>	No information <input type="checkbox"/>

*Attach more pages, if necessary.

Superior Court of Washington, County of Whatcom

In the Guardianship of:

Case No. _____

Minor/s

**Disclosure of Bankruptcy or
Criminal History
(DIS)**

**Disclosure of Bankruptcy or Criminal History
(A separate form to be completed by each Petitioner)**

1. Disclosure of bankruptcy

☐ I am **not** a debtor in a bankruptcy, insolvency, or receivership proceeding now or in the past.

☐ I am or was a debtor in a bankruptcy, insolvency, or receivership proceeding.

(Explain): _____

2. Disclosure of criminal history

☐ I have **not** been convicted of a felony, a crime involving dishonesty, neglect, violence, use of physical force, or any other crime related to my duties as a Guardian or Conservator.

☐ I have been convicted of a felony, a crime involving dishonesty, neglect, violence, use of physical force, or any other crime related to my duties as a Guardian or Conservator (Explain): _____

3. Court Findings

☐ I do **not** have any court findings against me involving a breach of fiduciary duty, violation of any state's consumer protection act, or violation of any other statute forbidding unfair or deceptive acts or practices in the conduct of any business.

[] I do have court findings against me involving a breach of fiduciary duty, violation of any state's consumer protection act, or violation of any other statute forbidding unfair or deceptive acts or practices in the conduct of any business. *(Explain)*

_____.

I declare under penalty of perjury under the laws of the State of Washington that the facts I have provided are true.

Signed at *(city)* _____, *(state)* _____ on *(date)* _____.

Signature

Printed Name

Superior Court of Washington, County of Whatcom

In the Guardianship of:

Minor/s

Case No. _____

**Cover Sheet for Criminal History
(Minor Guardianship)
(XCRIM)**

**Cover Sheet for Criminal History
(Guardianship)**

I have asked the Washington State Patrol for the criminal history record on each adult living in my home. Attached are the records I received.

List all people whose records are attached:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Submitted by (signature)

Print name

Date

WASHINGTON STATE PATROL
Identification and Background Check Section
PO Box 42633
Olympia WA 98504-2633
(360) 534-2000
<http://watch.wsp.wa.gov>



« Open website and create an account.

REQUEST FOR CONVICTION CRIMINAL HISTORY RECORD (RCW 10.97)

- ☒ **\$32 Fee — Conviction Criminal History Record Information Based on Name and Date of Birth**
☐ • For an \$11 fee and an immediate response using a credit card, access our web site listed above.
Establish a new credit card account by creating login and password at: <http://watch.wsp.wa.gov>
- ☐ **\$58 Fee — Conviction Criminal History Record Information Based on Fingerprints**
• A full set of fingerprints on a fingerprint card is required for processing.
- ☐ **\$10 Fee per Notary Seal — Notary Letter(s) in Addition to Criminal History Record Check**
• Requesting _____ Notarized Letter(s)

NOTE: The requested record information is furnished solely on the basis of name and/or description similarity with the subject of your inquiry. Positive identification or non-identification can only be effected upon receipt of fingerprints. Applicant may be advised of inquiry.

SUBJECT INFORMATION: (Please type or print clearly)

Applicant's Name _____
Last First Middle

Alias/Maiden Name/Other Names Used _____

Date of Birth _____
Month/Day/Year

REQUESTOR INFORMATION: (Please type or print clearly)

Name _____

Address _____

City State ZIP Code

Contact Phone Number () _____

Would you like your results e-mailed or mailed? (Please select only one)

☐ Mailed (It may take 7 to 14 business days for response, when mailed.)

☐ E-Mailed*

E-Mail Address _____

Password _____
(Password must be 8-15 characters)

* Results can only be e-mailed for name and date of birth inquiries. Fingerprint-based background checks and notary letters will be mailed. Password is required to open encrypted PDF results.

Superior Court of Washington, County of Whatcom

In the Guardianship of:

Minor/s

No. _____

Notice of Hearing about Emergency Minor Guardianship Petition (short-term)

(NTHG)

Clerk's action required: 1

[] Interpreter required in: _____
(language)

Notice of Hearing about Emergency Minor Guardianship Petition (short-term)

To: The parents, children, guardian, person with court-ordered custody, court clerk,
and all people who must get notice:

1. Petitioner has scheduled a court hearing:



for: _____ at: **9:00** [X] a.m. [] p.m.
Date Time

at: **311 Grand Avenue, Bellingham, WA 98225**
Court's Address

in: **5A – 5th Floor (Tuesdays) / 5B – 5th Floor (Thursdays)**
Courtroom or Department

with: **Minor Guardianship Commissioner**
Judge/Commissioner's Name or Docket/Calendar

Warning! If you do not go to the hearing, the court may sign orders without hearing
your side.

This hearing is because the Petitioner/s (*name of person/s starting this case*) _____ is asking the court to appoint (*name of proposed guardian*) _____ as emergency guardian of the children listed above.

2. How to Respond

Step 1: Fill out one of the forms below.

If you disagree, use:

- *Objection to Minor Guardianship*
(form GDN M 301).

If you agree, use:

- *Declaration of (name)* _____
(form FL All Family 135)

You can get the forms at:

- The Washington State Courts' website:
www.courts.wa.gov/forms
- Washington LawHelp: www.washingtonlawhelp.org, or
- The Superior Court Clerk's office or county law library (for a fee).

Step 2: Serve (give) a copy of your form to the Petitioner and the people listed in the Notice Attachment. You may use certified mail with return receipt requested. For more information on how to serve, read Superior Court Civil Rule 5.

Step 3: File your original form with the court clerk at this address:

Whatcom County Superior Court Clerk's Office

311 Grand Avenue, Suite 301 – 3rd Floor Bellingham, WA 98225
Address City State Zip

▶ _____
Person asking for this hearing signs here

Print name (if lawyer, also list WSBA #) *Date*

The following is my contact information:

Email: _____

Phone (Optional): _____

I agree to accept legal papers for this case at the following address (*this does **not** have to be your home address*):

<i>Street Address or PO Box</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
---------------------------------	-------------	--------------	------------

*****Note: You and the other party/ies may agree to accept legal papers by email under Civil Rule 5 and local court rules.***

Notice Attachment:
List of People to be Served or Given Notice

Important! Petitioner must have a copy of this *Notice* and the *Emergency Guardianship Petition* served on:

- The child's parents
- The child (if age 12 or older)
- Any person who is not a parent who has care or custody of the child
- Any attorney appointed

1. People who must be served:

Relationship	Name	Address
Parent 1		
Parent 2		
<input type="checkbox"/> Someone other than a parent who has care or custody of the child		
<input type="checkbox"/> The child is age 12 or older		
<input type="checkbox"/> Any attorney appointed		

Superior Court of Washington, County of Whatcom

In the Guardianship of:

Case No. _____

Minor/s

**Proof of Personal Service
(AFSR)**

Proof of Personal Service

I declare:

1. Who is Serving

This is original Service of Process I am 18 years of age or older, I am not a party to this action, and I am competent to be a witness. *(Use for Personal Service)*

2. Service

I served court documents for this case to *(name of party)*: _____
on *(date)*: _____ at *(time)*: _____ [] a.m. [] p.m.

Address:

Number and Street *City* *State* *Zip*

by giving the documents directly to them.

3. I served true and correct copies of the *(list titles of documents below)*:

<input type="checkbox"/>	Emergency Minor Guardianship Petition
<input type="checkbox"/>	Summons
<input type="checkbox"/>	Declaration Explaining Reasons for Minor Guardianship
<input type="checkbox"/>	Motion for Immediate Order (Ex-Parte) - Emergency Minor Guardianship and Restraining Order
<input type="checkbox"/>	Immediate Order (Ex-Parte) and Hearing Notice - Emergency Minor Guardianship and Restraining Order
<input type="checkbox"/>	WATCH Report
<input type="checkbox"/>	Notice of Hearing about Emergency Minor Guardianship Petition

<input type="checkbox"/>	Declaration of: _____
<input type="checkbox"/>	Declaration of: _____
<input type="checkbox"/>	Other: _____
<input type="checkbox"/>	Other: _____

I declare under penalty of perjury under the laws of the State of Washington that the statements above are true and correct.

Signed at (*city and state*) _____ on (*date*) _____

Signature

Printed name

Superior Court of Washington, County of Whatcom

In the Minor Guardianship of:

Case No. _____

Minor/s _____

**Proof of Service (Other than
Personal Service)
(AFSR)**

Proof of Service (Other than Personal Service)

*To be used when personal service is **not** required.*

I declare:

1. Who is Serving

I am (*check one*): ☐ the petitioner ☐ the guardian ☐ (*name*): _____
_____ and I am competent to be a witness in this case.

2. Type of Service

Proof of Mailing, Hand Delivery, or Delivery by Email - I served true and correct copies of the (*list titles of documents below*):

<input type="checkbox"/> Notice of Hearing _____ _____	<input type="checkbox"/> Emergency Minor Guardianship Petition
<input type="checkbox"/> Order: _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Declaration of: _____ _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Declaration of: _____ _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____

on (date) _____ (time) _____ [] a.m. [] p.m. to the following individuals at the following addresses by the method indicated: *(If additional space is needed, attach a separate sheet of paper.)*

Name/s: _____

Address: _____

[] Hand Delivered (Personal Service)
[] Regular 1st Class US Mail
[] Certified Mail, Return Receipt Requested

[] Other: _____

Name/s: _____

Address: _____

[] Hand Delivered (Personal Service)
[] Regular 1st Class US Mail
[] Certified Mail, Return Receipt Requested

[] Other: _____

Name/s: _____

Address: _____

[] Hand Delivered (Personal Service)
[] Regular 1st Class US Mail
[] Certified Mail, Return Receipt Requested

[] Other: _____

Name/s: _____

Address: _____

[] Hand Delivered (Personal Service)
[] Regular 1st Class US Mail
[] Certified Mail, Return Receipt Requested

[] Other: _____

(Attach Return Receipt if service by certified mail.)

I declare under penalty of perjury under the laws of the State of Washington that the statements above are true and correct.

Signed at (city and state) _____ on (date) _____

Signature

Printed Name

Superior Court of Washington, County of Whatcom

In the Guardianship of:

Case No. _____

Minor/s _____

**Motion for Immediate Order (Ex Parte) -
Emergency Minor Guardianship and
Restraining Order**

(MTSC)

**Motion for Immediate Order (Ex Parte) –
Emergency Minor Guardianship and Restraining Order**

To the person filing this motion:

You must file a *Minor Guardianship Petition* or an *Emergency Minor Guardianship Petition* before or at the same time as this motion. **Use this form** if you need an order placing the children with you right now. If you use this form you do **not** need GDN M 206 *Motion for Emergency Minor Guardianship*.

You must ask the court to sign the *Immediate Minor Guardianship Order (Ex Parte) and Hearing Notice* (Form GDN M 205). This Order may be signed "ex parte" (without the other party there). Contact the Superior Court Clerk's office for the procedure in your county.

Within 48 hours after the court signs the *Immediate Minor Guardianship Order*, you must serve this *Motion and Order* to the parents, any child 12 or older, anyone having custody of the children, and any lawyer appointed.

To the person receiving this motion:

If you do not agree with the requests in this motion, come to the hearing to explain why. You should also file an *Objection*. You may file other written proof supporting your side, and propose your own visitation schedule, guardian, or *Child Support Worksheets* (if needed).

To both parties:

If you want the court to consider your side, you **must**:

- File your original documents with the Superior Court Clerk; AND
- Give the Judge/Commissioner a copy of your papers (if required by your county's Local Court Rules); AND
- Give all other parties or their lawyers a copy of your papers; AND
- Go to the hearing.

The court may not allow you to testify at the motion hearing. Read your county's Local Court Rules, if any.

Bring proposed order GDN M 203 ***Emergency Minor Guardianship Order*** and any other needed orders to the hearing.

Deadline! Your papers must be filed and served by the deadline in your county's Local Court Rules, or by the State Court Rules if there is no local rule. Court Rules and forms are available online at www.courts.wa.gov.

1. My name is:_____. I am asking the court for an *Immediate Minor Guardianship Order* for these children:

Child's name	Age	Child's name	Age
1.		2.	
3.		4.	

The proposed guardian is (name):_____

2. Without an *Immediate Minor Guardianship Order* the children's health, safety, or welfare will be substantially and irreparably harmed prior to a hearing. (*Explain how the children could be harmed beyond repair*):

(If you need additional space attach another sheet)

3. **Notice** (check one):

☐ I should **not** have to notify the other parties in advance that I am asking for an *Immediate Minor Guardianship Order* because the children could be harmed beyond repair if I gave notice. (*Explain why the children could be harmed by giving notice before the hearing*):

☐ I **have** notified the other parties that I am asking for an *Immediate Minor Guardianship Order*. (*Describe any steps taken to give the other parties or their lawyers notice of this Motion*):

4. **Tribal Heritage**

If there is a reason to know that a child has **tribal heritage** (including ancestry or familial political affiliation), the court must treat the child as an Indian child unless and until the affected tribe/s decide otherwise or decline to respond after receiving proper notice.

An **Indian child** is a child who is a member of an Indian tribe, or who is the biological child of an Indian tribe member and is eligible for membership. You must try to find out if any child in this case is an Indian child. If so, the federal and state Indian Child Welfare Acts will apply to your case.

☐ I ask the court to find that the federal and state *Indian Child Welfare Acts* **do not** apply to this case. None of the children have tribal heritage. I know this because *(explain if the children have no tribal heritage, or if any possible tribal heritage has already been explored and decided in another court proceeding that complied with ICWA)*: _____

☐ The children are or may be Indian children.

Jurisdiction – The court has jurisdiction over the Indian children because they are:

☐ **not** domiciled or living on an Indian reservation, and are not wards of a tribal court.

☐ domiciled or living on an Indian reservation, and **(check all that apply)**:

☐ The children's tribe agrees to Washington State's concurrent jurisdiction.

☐ The children's tribe decided not to use its exclusive jurisdiction (expressly declined). (RCW 13.38.060)

☐ Washington State should claim emergency jurisdiction for children temporarily located off the reservation to protect the children from immediate physical damage or harm. (RCW 13.38.140)

Notice to tribes – Petitioner (check one): ☐ provided or is providing ☐ did **not** provide the required *Indian Child Welfare Act Notice* (form GDN M 401) and a copy of the *Petition* to the children's tribe/s, the parents, and any Indian custodian.

I ask the Court to approve these orders **immediately** (check all that apply):

5. Custody (immediate guardianship)

☐ No request.

☐ Order that the children listed in 1 will live with the proposed guardian until the hearing. Order the clerk to issue letters of guardianship to the proposed guardian that will be valid until the hearing. The letters should give the guardian the following powers:

☐ Healthcare decisions, including mental health

☐ School/educational decisions

☐ Access to and ability to release healthcare records

☐ Other (specify): _____

6. Temporary Restraining Orders

☐ No request.

☐ **Stay in Washington** – Order (name/s): _____ not to take the children listed in 1 out of Washington State.

☐ **Do Not Disturb** – Order (name/s): _____ not to disturb (check all that apply): ☐ my peace ☐ the peace of any child listed in 1.

☐ **Stay Away** – Order (name/s): _____ not to go onto the grounds of or enter (check all that apply): ☐ my home, workplace, or school ☐ the daycare or school of any child listed in 1.

☐ Also, to not knowingly go or stay within _____ feet of these places.

Important! This restraining order must be enforced through the civil contempt process in court.

7. Other immediate orders

☐ No request.

☐ (Specify): _____

➤ **I ask the court to approve these temporary orders at the motion hearing to stay in effect until the case is done (check all that apply):**

Important! The court will not grant requests below immediately. The court will consider these requests at the motion hearing.

8. Extend immediate orders

☐ No request.

☐ Extend the immediate orders I asked for above to stay in effect until this Emergency Minor Guardianship case or Minor Guardianship case, is done.

Appointment of an emergency guardian is likely to prevent substantial harm to the children's health, safety, or welfare AND no one else appears to have the authority, ability, and willingness to act to prevent the harm

Explain the risk of harm: _____

(Attach additional pages if necessary)

Explain why no one else has the authority, ability, and willingness to act: _____

(Attach additional pages if necessary)

9. Appoint Guardian ad Litem (GAL) or Court Visitor

- ☐ No request.
- ☐ Appoint a person (*Guardian ad Litem or Court Visitor*) to investigate and report to the court about what is in the children's best interest, and order who will pay this person's fees.

10. Parents' Visitation

- ☐ No request.
- ☐ Approve my proposed visitation schedule as listed in the *Minor Guardianship Petition* or *Emergency Minor Guardianship Petition*.

11. Support, Insurance, and Taxes

The children have a right to child support (including medical support) from the legal parents, according to state law. The emergency guardian may ask the Division of Child Support or the court to order temporary child support.

Support – I ask the court to order the parents to (***check all that apply***):

- ☐ no request.
- ☐ pay child support according to the *Child Support Schedule Worksheets*.
- ☐ provide and keep health insurance for the children.
- ☐ pay children's daycare, uninsured medical, or other expenses.

Tax Issues – I ask the court to order:

- ☐ Petitioners have the right to claim the children as dependents for purposes of personal tax exemptions and associated tax credits on our tax forms.
- ☐ (*other*): _____

12. Fees and costs

- ☐ No request.
- ☐ Order who should pay for court costs, Guardian ad Litem fees, Court Visitor fees, lawyer fees, and other reasonable fees.

13. Other Temporary Orders

- ☐ No request.
- ☐ (*Specify*): _____

➤ **Reasons for my requests**

14. Why are you asking the court for the orders in sections 9 through 13? (Explain):

- If you need more space you may add lines, attach pages, or file a separate declaration using form FL All Family 135.
- If you are asking for child support, also fill out the *Child Support Worksheets*. If you have received public assistance for any child in this case, also fill out the *Public Assistance Declaration*, form FL All Family 132. Child support is based upon the income of both parents, not the income of the guardian.

This image shows a single page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page, leaving small margins at the top and bottom. There are no vertical margin lines, text, or other markings on the page.

Person asking for this order fills out below:

I declare under penalty of perjury under the laws of the State of Washington that the facts I have provided on this form (including any attachments) are true. ☐ I have attached (#): _____ pages.

Signed at (city and state): _____ Date: _____

Person asking for this order signs here

Print name here

The following is my contact information:

Email: _____ Phone (Optional): _____

I agree to accept legal papers for this case at (check one):

☐ my lawyer's address, listed below.

Superior Court of Washington, County of Whatcom

In the Guardianship of:

Respondent/s (*minors/children*)

Case No. _____

**Immediate Order (Ex Parte)
and Hearing Notice - Emergency Minor
Guardianship and Restraining Order
(ORAPEMG)**

Clerk's action required: 1, 3, 5

☐ Interpreter required in: _____
(language)

**Immediate Order (Ex Parte) and Hearing Notice-
Emergency Minor Guardianship and Restraining Order**

1. Guardianship Summary.

Summarize the guardianship order below.

Date guardian appointed:		Hearing date from section 3:	
Children			
Child's Name	Letters Expire	Child's Name	Letters Expire
1.	on hearing date	2.	on hearing date
3.	on hearing date	4.	on hearing date
Limited Guardian/s			
Name			
Address			
Phone			
Email			

2. This Order starts immediately and ends after the hearing listed below.

Important! Hearing must be held within **five** court days.

3. Hearing Notice – The court will consider extending this order and the other requests in the *Motion for Immediate Order* at a court hearing:



for: _____ at: 9:00 [X] a.m. [] p.m.
Date Time

at: 311 Grand Avenue, Bellingham, WA 98225
Court's Address

in: 5A – 5th Floor (Tuesdays) / 5B – 5th Floor (Thursdays)
Room or Department

with: Minor Guardianship Commissioner
Judge/Commissioner's name or Docket/Calendar

Warning! If you do not go to the hearing above, the court may sign orders without hearing your side.

4. Findings.

The court has reviewed the *Petition Motion for Immediate Order- Emergency Minor Guardianship (Ex Parte)*, supporting documents, and any other evidence considered on the record, including _____

The court finds that the children's health, safety, or welfare will be substantially and irreparably harmed before a hearing with notice can be held.

[] Other findings: _____

➤ **Court Orders.**

5. Custody (immediate guardianship).

[] No request made.

[] (Name): _____ is appointed immediate emergency guardian, until the hearing listed above, for the following children:

Child's name	Age	Child's name	Age
1. _____	_____	2. _____	_____
3. _____	_____	4. _____	_____

The children will live with the guardian listed above until the hearing listed in 3.

Clerk's Action: The clerk shall issue Letters of Limited Guardianship to the person named above that expire on the date of the hearing listed in 3.

☐ Until the hearing, the guardian has **only** the following powers:

☐ Healthcare decisions, including mental health

☐ School/educational decisions

☐ Access to and ability to release healthcare records

☐ Other powers (specify): _____

6. Temporary Restraining Orders.

☐ No request made.

☐ Request denied.

☐ (Name/s): _____ are restrained as follows:

☐ **Stay in Washington** – The Restrained Person/s must not take the children listed in **5** out of Washington State.

☐ **Do Not Disturb** – The Restrained Person/s must not disturb the peace of (check all that apply): ☐ the guardian ☐ the children listed in **5**.

☐ **Stay Away** – The Restrained Person/s must not go onto the grounds of or enter (check all that apply): ☐ the guardian's home, workplace, or school ☐ the daycare or school of the children listed in section **5**.

☐ Also, the Restrained Person/s must not knowingly go or stay within _____ feet of these places (1000 feet if not filled out).

Warning! Violation of this order may result in financial penalties or contempt of court.

7. Other immediate orders.

☐ Does not apply.

☐ _____

Ordered.

Presented by: ☐ Petitioner ☐ Respondent

Important! Within 48 hours after the court signs this Order, you must serve the Motion, Petition, and this Order to:

- every parent,
- any child 12 or older,
- anyone having custody of the children, and
- any lawyer appointed.

Superior Court of Washington, County of Whatcom

In the Guardianship of:

Minor(s) _____

Case No. _____

**Order on Emergency Minor
Guardianship**

☐ Granted (ORAPEMG)

☐ Denied (ORDYMT)

Clerk's action required: **1, 9, 10**

Order on Emergency Minor Guardianship

Use this form together with one of these forms:

- *Emergency Minor Guardianship Petition (short-term) (form GDN M 202)*
- *Motion for Immediate Order – Emergency Guardianship and Restraining Order (form GDN M 204), or*
- *Motion for Emergency Minor Guardianship Order (form GDN M 206)*

1. Guardianship Summary.

☐ Does not apply. The *Emergency Minor Guardianship Petition or Motion* is denied.

☐ Summarize the guardianship order below:

Date guardian appointed:		Next review date, if any:	
Children			
Child's Name	Letters Expire	Child's Name	Letters Expire
1.		2.	
3.		4.	
Guardian/s			
Name			
Address			

Phone		
Email		
Type/ Training	<input type="checkbox"/> Non-professional (Lay guardian). Training (<i>section 11</i>): <input type="checkbox"/> completed <input type="checkbox"/> required <input type="checkbox"/> Certified professional guardian (CPG) <input type="checkbox"/> Public professional guardian (PUG)	
Limited/ Full	The guardianship is (<i>check one</i>): <input type="checkbox"/> limited <input type="checkbox"/> full <i>(If a parent of the child has any visitation or decision-making authority, the guardianship is limited. See sections 12 and 14.)</i>	
	Parent 1	Parent 2
Name		
Address		
Phone		
Email		

2. Children.

The (*check one*): ☐ Court ☐ Minor ☐ Person interested in the minor's welfare
(*name*): _____ requested that
an emergency guardian be appointed for the children listed in section 1.

➤ **Findings.**

A hearing was held on the *Emergency Minor Guardianship Petition or Motion*. The court considered the petition or motion, any objection, supporting documents, and any other evidence in the record, including: _____

3. Basis for Emergency Guardianship.

The petition or motion should be:

☐ **Denied** because: _____

☐ **Approved.** The court finds that appointment of an emergency guardian is likely to prevent substantial harm to the minor's health, safety, or welfare, and no other person appears to have authority, ability, and willingness to act to prevent the harm.

The approval is based on the following facts: _____

4. **Tribal Heritage.**

If there is a reason to know that a child has **tribal heritage** (including ancestry or familial political affiliation), the court must treat the child as an Indian child unless and until the affected tribe/s decide otherwise or decline to respond after receiving proper notice.

An **Indian child** is a child who is a member of an Indian tribe, or who is the biological child of an Indian tribe member and eligible for membership. Indian Child Welfare Act, 25 USC 1903.

☐ None of the children have tribal heritage. The state and federal *Indian Child Welfare Acts* do not apply to this case.

☐ These children are or may be Indian children (name/s): _____

The federal and state *Indian Child Welfare Acts* apply to this case.

Jurisdiction – The court ☐ has ☐ does **not** have jurisdiction over the Indian children.

Notice to tribes – The Petitioner (check one):

☐ provided the *Indian Child Welfare Act Notice* (GDN M 401) and a copy of the *Petition* to all of the tribes, people, and agencies entitled to notice.

☐ did **not** provide the *Indian Child Welfare Act Notice* and a copy of the *Petition* to all of the tribes, people, and agencies entitled to notice.

Order – Petitioners must provide the *Indian Child Welfare Act Notice* (form GDN M 401) and a copy of the *Petition* to the:

☐ children's tribes or possible tribes

☐ Indian custodian

☐ children's parents

☐ Bureau of Indian Affairs

☐ The court does not have enough information to decide whether any of the children are Indian children.

Order – Petitioners must make a good faith effort to find out if any of the children are Indian children and provide the *Indian Child Welfare Act Notice* (GDN M 401) and a copy of the *Petition* to all of the tribes, people, or agencies entitled to notice. Good faith efforts are defined in RCW 13.38.050.

5. **Jurisdiction Over the Children.**

☐ This court **cannot** decide this case for these children (names): _____ because this court does not have jurisdiction over them. The *Petition* should be dismissed as to these children.

☐ This court **can** decide this case for these children because (check all that apply; if a box applies to all of the children, you may write "the children" instead of listing names):

☐ **Exclusive, continuing jurisdiction** – A Washington court has already made a parenting plan, residential schedule, or custody order for the children and the court still has authority to make other orders for (children's names): _____

☐ **Home state jurisdiction** – Washington is the children's home state because (check all that apply):

- [] *(Children's names):* _____ lived in Washington with a parent, or someone acting as a parent, for at least the 6 months just before this case was filed or, if the children were less than 6 months old when the case was filed, they had lived in Washington with a parent, or someone acting as a parent, since birth.
- [] There were times the children were not in Washington in the 6 months just before this case was filed (or since birth if they were less than 6 months old), but those were temporary absences.
- [] *(Children's names):* _____ do not live in Washington right now, but Washington was the children's home state sometime in the 6 months just before this case was filed, and a parent or someone acting as a parent of the children still lives in Washington.
- [] *(Children's names):* _____ do not have another home state.
- [] **No home state or home state declined** – No court of any other state (or tribe) has the jurisdiction to make decisions for *(children's names):* _____ or a court in the children's home state (or tribe) decided it is better to have this case in Washington **and:**
- The children and a parent, or someone acting as a parent, have ties to Washington beyond just living here; **and**
 - There is a lot of information (substantial evidence) about the children's care, protection, education, and relationships in this state.
- [] **Other state declined** – The courts in other states (or tribes) that might be *(children's names):* _____'s home state have refused to take this case because it is better to have this case in Washington.
- [] **Temporary emergency jurisdiction** – Washington had temporary emergency jurisdiction over *(children's names):* _____ when the case was filed, and now has jurisdiction to make a final custody decision because:
- When the case was filed, the children were abandoned in this state, or the children were in this state and the children (or children's parent or siblings) were abused or threatened with abuse;
 - The court signed a temporary order on *(date)* _____ saying that Washington's jurisdiction will become final if no case is filed in the children's home state (or tribe) by the time the children have been in Washington for _____ months;
 - The children have now lived in Washington for 6 months; **and**
 - No case concerning the children has been started in the children's home state (or tribe).
- [] Other reason *(specify):* _____

6. Background Records Checked.

- [] **Denied.** The court did not check background records because this *Petition* is denied.
- [] **Motion.** This is an Order on a motion. The court checked the judicial information system for any information or proceedings relevant to placement of the children.

☐ **Petition.** This is an Order on a Petition. The court has (unless stated otherwise below):

- Checked the judicial information system for any information or proceedings relevant to placement of the children;
- Reviewed records from the Department of Children, Youth, and Families provided in response to the court's *Order to DCYF to Release CPS Information*; and
- Reviewed the criminal history record from the Washington State Patrol for the guardian and each adult living in the guardian's home.

☐ Other findings (specify): _____

7. Service Members' Relief Acts (Active Duty Military).

The **federal** Servicemembers' Civil Relief Act covers:

- Army, Navy, Air Force, Marine Corps, and Coast Guard members on active duty;
- National Guard or Reserve members under a call to active service for more than 30 days in a row; and
- commissioned corps of the Public Health Service and NOAA.

The **state** Service Members' Civil Relief Act covers those service members listed above who are either stationed in or residents of Washington State, and their dependents, except for the commissioned corps of the Public Health Service and NOAA.)

☐ (Name/s): _____ are **not** covered by the state or federal Service Members' Civil Relief Acts, and the acts do not apply to this proceeding.

☐ (Name/s): _____ are covered by the state or federal Service Members' Civil Relief Acts, and the acts do apply to this proceeding.

☐ The court signed the *Order re Service Members Civil Relief Act* (form FL All Family 170) filed separately.

☐ The requirements of the act(s) have been met as follows:

☐ The court does not have enough information to find whether (name/s): _____

_____ are
covered by the state or federal *Service Members' Civil Relief Acts*.

8. Limits on Guardian's Authority.

☐ Does not apply. The Petition or Motion should be denied.

☐ No limits should be put on the guardian's authority over the children's upbringing or decision-making for the children.

☐ The guardian should share decision-making authority and access to records with parent/s and/or children as ordered in sections **9** and **10** below because:

☐ Other findings: _____

➤ **The Court Orders.**

9. Emergency Guardianship.

☐ **Denied.** The emergency guardianship petition or motion is denied.

☐ The Petition for Emergency Minor Guardianship is dismissed.

☐ **Return Children.** The children must be returned to *(name)*: _____
_____ by *(date)*: _____ at *(time)*: _____
as follows: _____

Skip sections 10 through 15 if the petition or motion is denied.

☐ **Approved.** An emergency guardianship is approved for the following children:

(Name/s) _____ is/are
appointed as emergency guardian of the children listed above. The children shall live
with the emergency guardian.

The Emergency Minor Guardianship is:

☐ **Limited.** The limitations on the emergency guardian's authority are listed in
sections **12** through **14**.

☐ **Full.** Parents have no visitation or decision-making authority.

To the clerk: Issue letters. Once the guardian files an acceptance of appointment, the
clerk of the court shall issue *Letters of Guardianship* for the children, which remain valid
until the expiration date listed in the **Guardianship Summary** in section **1**.

10. Duration of Guardianship.

☐ The emergency guardianship is ordered until a final hearing is held on the *Minor
Guardianship Petition* (RCW 11.130.190) or *Standby Minor Guardianship Petition*
(RCW 11.130.220).

☐ *Letters of Guardianship* will be issued for 60 days until *(date)* _____.

☐ *Letters of Guardianship* will be issued until the hearing. The scheduled
hearing date is _____.

☐ **Emergency Petition** (*no Minor Guardianship Petition filed*). The emergency
guardianship will expire on *(date)* _____, no later than 60 days from the date
of this order.

11. Lay Guardian Training.

Complete at <https://www.courts.wa.gov/guardianportal/index.cfm?fa=guardianportal.title11minor>

☐ Does not apply. The guardian is a certified professional guardian.

☐ The guardian provided proof of completion of lay guardian training.

☐ The guardian must file proof of completion of lay guardian training within 90 days.

☐ The lay guardian training is waived.

12. Guardian's Authority.

The guardian/s have the right to make decisions and determine the children's upbringing, including their education, healthcare, and religious training, unless limited below.

Type of Major Decision	Guardian Decides	Parent/s Decide (write one parent's name or "both")
School/educational	<input type="checkbox"/>	<input type="checkbox"/>
Healthcare (not emergency)	<input type="checkbox"/>	<input type="checkbox"/>
Authority to apply for passport and travel internationally	<input type="checkbox"/>	<input type="checkbox"/>
Driver's license or state I.D.	<input type="checkbox"/>	<input type="checkbox"/>
Passport:	<input type="checkbox"/>	<input type="checkbox"/>
Social Security:	<input type="checkbox"/>	<input type="checkbox"/>
Vital Statistics:	<input type="checkbox"/>	<input type="checkbox"/>
Administration Records:	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>

☐ Other: _____

If a parent or child retains any decision-making authority, then the guardianship is limited.

13. Access to Records.

The following people have the right to access records (children may have the right to control access to records under other laws):

Type of Record	Guardian Can Access	Parent/s Can Access (write one parent's name or "both")
School/educational	<input type="checkbox"/>	<input type="checkbox"/>
Healthcare	<input type="checkbox"/>	<input type="checkbox"/>
Social Security:	<input type="checkbox"/>	<input type="checkbox"/>
Vital Statistics:	<input type="checkbox"/>	<input type="checkbox"/>
Administration Records:	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>

☐ Other: _____

14. Parents' Visitation.

The parents' visitation shall be as follows: _____

If a parent has visitation rights, then the guardianship is limited.

15. Relocation Order.

Guardians are subject to the notice requirements of RCW 26.09.430 through RCW 26.09.490 when moving with children involved in this action. See **FL Relocate 736** for a summary of the law about moving with the children.

16. Support, Insurance, and Taxes.

- ☐ The court is not issuing an order about support, health insurance, or taxes at this time.
- ☐ **Child Support** – The court signed the final Child Support Order and Worksheets filed separately today or on *(date)*: _____.
- ☐ **Health Insurance or other expenses** -The parents must pay for health insurance, uninsured medical, daycare, or other necessary expenses (check one):
- ☐ as listed on the final Child Support Order.
- ☐ as follows *(specify)*: _____.
- ☐ **Tax Issues** – The parties have the right to claim the children as their dependents for purposes of personal tax exemptions and associated tax credits on their tax forms as follows:
- ☐ as listed on the Child Support Order.
- ☐ the appointed guardian may claim the children.
- ☐ other *(specify)*: _____.
- ☐ Other: _____.

17. Temporary Restraining Order.

- ☐ No one requested a Temporary Restraining Order in this case.
- ☐ **Denied.** The request for a Temporary Restraining Order is denied.
- ☐ **Approved.** The request for a Temporary Restraining Order is approved.
- ☐ **Do not disturb** – *(name/s)*: _____ must not disturb the peace of _____.
- ☐ **Stay away** – *(name/s)*: _____ must not go onto the grounds of or enter the home, workplace, or school, or the daycare or school of any person or child listed here: _____.
- ☐ Also, *(name/s)*: _____ must not knowingly go or stay within _____ feet of home, workplace, or school, or the daycare or school of any person or child listed here: _____.
- ☐ **Other temporary restraining orders:** _____.

Warning! Violation of this order may result in financial penalties or contempt of court.

18. Guardian ad Litem/Court Visitor.

☐ Does not apply.

☐ (Name) _____ is appointed Guardian ad Litem or Court Visitor in the consolidated Minor Guardianship or Standby Minor Guardianship case.

☐ The GAL or CV is discharged and fees and costs are approved as reasonable in the total amount of \$_____. They shall be paid from ☐ the county ☐ split between the parties as follows: _____

☐ Other (specify): _____

19. Other orders (if any).

Date

Judge or Commissioner

Parties or their lawyers fill out below:

Presented by:

Signature of Party/Lawyer

Print Name WSBA No.

Copy received and approved by:

Signature of Party/Lawyer

Print Name WSBA No.

Signature of Party/Lawyer

Print Name WSBA No.

Signature of GAL or Visitor

Print Name

Superior Court of Washington, County of Whatcom

In the Guardianship of:

Case No.: _____

Minor/s

**Acceptance of Appointment of
Guardian
(ACPAP)**

Acceptance of Appointment of Guardian

1. I have been appointed:
[☐] Full [☐] Limited Guardian of (Name) _____
2. I accept this appointment and I will perform duties as Guardian according to law. I understand that the duties of a Guardian are described in Chapters 11.130 of the Revised Code of Washington (RCW).

I declare under penalty of perjury under the laws of the State of Washington that the facts I have provided are true.

Signed at (city) _____, (state) _____ on (date) _____.

Signature

Printed Name

WSBA or CPG No.