## STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY

## PETITION FOR STEPPARENT ADOPTION

FILE NO.

In the matter of Full name of	f child					, adoptee
The petitioners are:		Relationship	Address	Oite Otata Zin	Date and	
Name		to Adoptee	Address,	City, State, Zip	of Bir	rtn
Maiden:						
Maiden:						
☐ 1. An action within the	jurisdiction of th	ne family division of ci	cuit court involvin	g the family or family	members of t	he minor
has been previously	/ filed in		Court, Case	Number		, was
assigned to Judge _			, and		is no longer	pending.
2. The adoptee is:						
F	Full name of child (type or print)		Birth date and time			
C	ity, county, and state	e of birth				
C	urrent residential ad	ldress (if known)				
3. The adoptee will be m						
4. The adoptee's name w	/ill □ he cha	changed. nged to First				
4. The adoptee 3 hame w		First	Middle	Las	st	·
5. The adoptee's property	/ is					·
6. The adoptee's parents	are					
Father's name (type or print) Birth date		Mother's name and	maiden name (type or pri	nt)	Birth date	
Address		Address				
City, state, zip			City, state, zip			
$\Box$ 7. The adoptee's court	t-appointed guar	rdian and/or conserva		oy[ies] of letters of authorit	y)	
Name(s) and address(es	5)					·

8. The other parent has failed to provide support or comply with a support order and failed to visit or contact the adoptee for a period of 2 years or more. (Attach form PCA 302, Supplemental Petition and Affidavit to Terminate Parental Rights of Noncustodial Parent.)

(See additional page)

Do not write below this line - For court use only

File No. \_\_\_\_

 $\Box$  9. The adoptee is an Indian child as defined in MCR 3.002(12). The identity of the tribe is

Name of tribe, if known		·
I REQUEST:		

10. Termination of all existing parental rights inconsistent with the order of adoption, entry of an order approving placement of the child with me, and entry of an order of adoption with the adoptee's name recorded as stated in item 4.

11. The adoption be expedited because \_\_\_\_\_\_

I declare that the statements above are true to the best of my information, knowledge, and belief.

Attorney signature	Date
Attorney name (type or print) Bar no.	Signature of petitioner
Address	Signature of petitioner
City, state, zip Telephone no.	Petitioner telephone no.
IT IS ORDERED:	
Court agent or employee	is directed to fully investigate and
report its findings in writing to this court, within 3 mon	ths of this order, in accordance with the provisions of MCL 710.46.

 $\Box$  13. The full investigation is waived.

14. The petitioner(s) shall give notice of this petition to the persons prescribed in MCR 3.800(B) in accordance with MCR 3.802(A)(3) and MCR 3.807(B), if applicable (use form PCA 352).

Date

Judge

Bar no.