

**IN THE CROW TRIBAL COURT  
 IN AND FOR THE CROW INDIAN RESERVATION  
 P.O. BOX 489, CROW AGENCY, MT 59022  
 PHONE: 406-638-7400 FAX: 406-638- 7415**

<p><b>IN RE THE CUSTODIANSHIP OF:</b>  <b>A)</b> _____  <b>B)</b> _____  <b>C)</b> _____  <b>MINOR INDIAN CHILD(REN)</b></p>	<p><b>JUVENILE CASE NO.:</b> _____  <b>PETITION FOR CUSTODIANSHIP</b></p>
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**Note: A certified birth certificate must be attached if either parent has consented to the custodianship. It must be the current birth certificate filed with the state.**

**Jurisdictional Statement:** The Crow Tribal Court shall have exclusive and original jurisdiction pursuant to Title 9-1-104 where (1) (a) a child who is an enrolled member of the Crow Tribe; and/or (b) a child who is eligible for such enrollment; and/or (c) an Indian child residing or domiciled within the exterior boundaries of the Crow Reservation; and/or (d) an Indian Child having significant contacts with the Reservation community; and where there are (4) Proceedings to appoint a legal guardian for a child in one or more of the categories (a) through (d) above.

**1. PETITIONER(S) INFORMATION**

Comes now the petitioner(s), (a) \_\_\_\_\_ and  
 (b) \_\_\_\_\_ in the above entitled action and respectfully  
 states the following:

**Petitioner(s) Full Name(s):**

(a). \_\_\_\_\_ DOB: \_\_\_\_\_

Enrolled Tribal Affiliation and/or Race: \_\_\_\_\_

Cell and/or Home Phone No: \_\_\_\_\_

(b). \_\_\_\_\_ DOB: \_\_\_\_\_

Enrolled Tribal Affiliation and/or Race: \_\_\_\_\_

Cell and/or Home Phone No.: \_\_\_\_\_

(c). Petitioner(s) Current Mailing Address: \_\_\_\_\_

**2. MINOR CHILD/NATURAL PARENT INFORMATION**

**Minor Child #A Information**

Full Name: \_\_\_\_\_ Gender: \_\_\_\_\_

DOB: \_\_\_\_\_ Enrolled Tribal Affiliation: \_\_\_\_\_

Current residence: \_\_\_\_\_

Name of current caretaker(s) of child: \_\_\_\_\_

Petitioner(s) relationship to the child \_\_\_\_\_  
*(If related, please indicate whether paternal or maternal)*

**Natural Mother of Child # (A) Information**

Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Enrolled Tribal Affiliation and/or Race: \_\_\_\_\_

Address: \_\_\_\_\_ Cell/Home No: \_\_\_\_\_

**Natural Father of Child # (A) Information**

Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Enrolled Tribal Affiliation and/or Race: \_\_\_\_\_

Address: \_\_\_\_\_ Cell/Home No: \_\_\_\_\_

**Are these both the natural parents for all minor children listed in the petition?  Yes  No**  
**If yes, you will only need to fill out the *parental* information once.**

**Minor Child #B Information**

Full Name: \_\_\_\_\_ Gender: \_\_\_\_\_

DOB: \_\_\_\_\_ Enrolled Tribal Affiliation: \_\_\_\_\_

Current residence: \_\_\_\_\_

Name of current caretaker(s) of child: \_\_\_\_\_

Petitioner(s) relationship to the child: \_\_\_\_\_  
*(If related, please indicate whether paternal or maternal)*

**Natural Mother of Child # (B) Information**

Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Enrolled Tribal Affiliation and/or Race: \_\_\_\_\_

Address: \_\_\_\_\_ Cell/Home No: \_\_\_\_\_

**Natural Father of Child # (B) Information**

Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Enrolled Tribal Affiliation and/or Race: \_\_\_\_\_

Address: \_\_\_\_\_ Cell/Home No: \_\_\_\_\_

**Minor Child #C Information**

Full Name: \_\_\_\_\_ Gender: \_\_\_\_\_

DOB: \_\_\_\_\_ Enrolled Tribal Affiliation: \_\_\_\_\_

Current residence: \_\_\_\_\_

Name of current caretaker(s) of child: \_\_\_\_\_

Petitioner(s) relationship to the child \_\_\_\_\_

*(If related, please indicate whether paternal or maternal)*

**Natural Mother of Child # (C) Information**

Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Enrolled Tribal Affiliation and/or Race: \_\_\_\_\_

Address: \_\_\_\_\_ Cell/Home No: \_\_\_\_\_

**Natural Father of Child (C) Information**

Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Enrolled Tribal Affiliation and/or Race: \_\_\_\_\_

Address: \_\_\_\_\_ Cell/Home No: \_\_\_\_\_

**3. Has consent to the custodianship by the natural parents been granted?**

Yes (consent forms must be attached). If consent has been granted by only 1 parent of each minor child, please explain why.

No. Please explain why consent has not been obtained, including any facts related to the physical care or custody of the child, past or present, which may be relevant to the petition.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Please state why the custodianship is in the best interest of the child(ren).

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5. Please list any real or personal property the above minor children have interest in and the value and/or annual interest of such property. If the child(ren) is expected to become entitled to any real or personal property during the duration of the custodianship, please explain:

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6. Please list any per capita, dividends, social security benefits or any other payments received by the child(ren) and who is being requested as payee:

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7. Please state how long the duration of the custodianship will be or whether it will be of an indefinite duration:

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**THEREFORE, based on the above information, the Petitioner(s) requests the Court to do the following:**

- a. That the Court appoint the petitioner(s) \_\_\_\_\_ as custodians  
*Names of Petitioner(s)*  
of the above child(ren) and over his/her property.
- b. That the custodianship begin on \_\_\_\_\_ and end on \_\_\_\_\_.
- c. That the Court name the following individuals as payee(s) \_\_\_\_\_  
for the following payments received: \_\_\_\_\_.

**FURTHER, the petitioner(s) request a summary order (no hearing) and hereby swears that pursuant to 9-4-109 of the Crow Law and Order code all of the following elements are met (Please read through them all before checking):**

Proposed custodian(s) is a member of the child's extended family or community, or otherwise has significant ties to the child(ren).

Consent has been given by both natural parents, the only living parent, or the only parent who has lawful authority to make such sole decisions.

The petitioner(s) believe it is clearly shown that the proposed custodianship is in the best interest of the child(ren).

Non-Applicable. One or more of the above elements are not met.

**Note: It shall be judicial discretion to grant or deny a request for a summary order. If the request is denied, parties will receive a notice of hearing in the mail. Please wait at least 10 days before you inquire on a summary order.**

**DATED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_\_.**

X \_\_\_\_\_  
Petitioner

X \_\_\_\_\_  
Petitioner

**Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.**

SEAL

\_\_\_\_\_  
Court Clerk or Notary Public