FILE DATE _____ Oakland County Probate File no. _____

DHS RECORD CHECK FORM

☐ A petition requesting appointment of a guardian/successor guardian is being filed with this court. [**Complete #1, 2, 3 and 4**]

☐ A petition seeking to terminate the guardianship is being filed with this court. [**Complete #1, 2 and 4**]

For DHS Use Only

1. **Minor Child's Name** _____ Date of Birth _____

Proposed Legal Residence

☐Guardian's home ☐Mother's home ☐Father's home ☐Other _____

_____

Address City State Zip

Telephone no. _____

2. **Minor's Parents**

Mother's Name _____ Date of Birth _____

Address _____

Father's Name _____ Date of Birth _____

Address _____

3. **Proposed Guardians**

#1 Name _____ Date of Birth _____

How is this person related to the minor? _____

EX: Grandparent, aunt/uncle, stepparent, sibling, friend, neighbor, etc.

Address _____

#2 Name _____ Date of Birth _____

How is this person related to the minor? _____

EX: Grandparent, aunt/uncle, stepparent, sibling, friend, neighbor, etc.

Address _____

4. **Other persons living in the home listed in #1** (where minor would live if the petition is granted)

a) Name _____ Date of Birth _____

How is this person related to the minor? _____

EX: Grandparent, aunt/uncle, stepparent, sibling, friend, neighbor, etc.

b) Name _____ Date of Birth _____

How is this person related to the minor? _____

EX: Grandparent, aunt/uncle, stepparent, sibling, friend, neighbor, etc.

c) Name _____ Date of Birth _____

How is this person related to the minor? _____

EX: Grandparent, aunt/uncle, stepparent, sibling, friend, neighbor, etc.

d) Name _____ Date of Birth _____

How is this person related to the minor? _____

EX: Grandparent, aunt/uncle, stepparent, sibling, friend, neighbor, etc.

Form Returned to Court by DHS on _____

Date

Pursuant to MCL 722.627, this information is necessary to decide an issue before the court.