CONTAINS NONPUBLIC DIGITAL INFORMATION

MAINE JUDICIAL BRANCH

IN RE: _____

DISTRICT COURT
Location (Town): _____
Docket No.: _____

☐ **MOTION FOR JUDICIAL REVIEW OF PERMANENCY GUARDIANSHIP**
☐ **PETITION TO TERMINATE PERMANENCY GUARDIANSHIP**
☐ **PETITION TO DETERMINE RIGHTS AND CONTACT**
22 M.R.S. §§ 4038(1-A)(E) and 4038-C(6)

PLEASE NOTE: You must provide a copy of this document to all parties in the child protection case pursuant to Rule 4 of the Maine Rules of Civil Procedure and provide proof of service with the court.

1. My name is: _____

2. My relationship to the minor child(ren(s) is: _____

3. I am requesting that the court:
   a. ☐ Review the permanency guardianship;
   b. ☐ Terminate the permanency guardianship; or
   c. ☐ Determine rights of contact with the minor child(ren).

4. **Permanency Guardian(s)' Information:**

   Name(s): _____
   Address: _____
   Phone: _____
   Email: _____

5. **Legal Parent(s)' Information:** (*Do not provide information for parents whose rights have been terminated)*
   a. Name: _____
      Date of birth (*mm/dd/yyyy*): _____
      Address: _____
      Phone: _____
      Email: _____

   b. Name: _____
      Date of birth (*mm/dd/yyyy*): _____
      Address: _____
      Phone: _____
      Email: _____

6. **(*Complete question 6 only if this is a petition to terminate permanency guardianship or a petition to determine rights of contact*)**

ADA Notice: The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation, contact the Court Access Coordinator, accessibility@courts.maine.gov, or a court clerk.
Language Services: For language assistance and interpreters, contact a court clerk or interpreters@courts.maine.gov.

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☐ This is the first time I have petitioned the court to terminate the permanency guardianship or determine rights of contact; or

☐ This is **not** the first time I have petitioned the court to terminate the permanency guardianship or determine rights of contact, but at least 12 months have passed since I filed my last petition and there has been the following substantial change in circumstances:

(*Attach additional pages if more space is needed.*)

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☐ I swear under penalty of perjury that the above statements are true and correct. I understand that these statements are made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to $5,000 if I give false information to the court.

Date (mm/dd/yyyy): _____ ▶ _____

Signature of Petitioner

☐ Address is confidential (*if so, leave blank below*)

Address: _____

_____

Telephone: _____

Email: _____

Attorney for Petitioner, if any:

▶ _____

Signature of Attorney

Date (*mm/dd/yyyy*): _____

Name: _____

Bar Number: _____

Address: _____

_____

Telephone: _____

Email: _____

STATE OF MAINE

_____ COUNTY

Personally appeared the above named, _____, and made oath that the foregoing statements are true under penalty of perjury.

Before me,

Date (*mm/dd/yyyy*): _____ ▶ _____

☐ Attorney at Law ☐ Notary Public ☐ Clerk

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ORDER OF THE COURT

IT IS ORDERED, pursuant to 22 M.R.S. §§ 4005, 4038(1-A)(E), and 4038-C(6), that:

☐ A _____ hearing is set for (*mm/dd/yyyy*) _____ at _____ ☐ AM ☐ PM.

☐ A guardian ad litem for the child is appointed pursuant to the attached order (PC-004).

☐ Counsel for the parent(s) will be assigned, and an order of appointment will be sent separately. This is an initial assignment of counsel. The parent(s) must complete and file a Child Protection Financial Affidavit (PC-003) with the clerk before the next scheduled court date. Failure to file the affidavit may result in the loss of representation by counsel at state expense in this matter.

☐ Counsel for the permanency guardian(s) will be assigned, and an order of appointment will be sent separately. This is an initial assignment of counsel. The permanency guardian(s) must complete and file a Child Protection Financial Affidavit (PC-003) with the clerk before the next scheduled court date. Failure to file the affidavit may result in the loss of representation by counsel at state expense in this matter.

☐ Other:

_____

_____

_____

_____

_____

_____

Date (*mm/dd/yyyy*): _____ ▶ _____

Judge, Maine District Court

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