Affidavit Regarding Minor Children



Packet #8



These forms must not be used to engage in the unauthorized practice of law. The court is not responsible for (1) actions taken by the users of these forms or (2) the users' reliance upon the instructions or information provided.

General Instructions for Completing this Packet

You may use fillable forms available online at:

http://www.azcourts.gov/selfservicecenter/Self-Service-Forms/Filing-for-Minor-

<u>Guardianship</u> or print the attached form and complete by hand. If you are filling out this form by hand, please use ink.

This packet contains the following form that must be filled out and submitted to the Court:

Affidavit Regarding Minor Children (A.R.S. §25-439)

Caption:

Personal information – Fill in your name, street address, city, state, ZIP code, and telephone number.

Case No. & Judge/Commissioner – Leave this blank. The clerk will fill in this information for you when you file your Petition.

In the Matter of the Guardianship of – Enter the name of the Minor.

Information about Minor Children

For each child that you are asking to be guardian for, fill in the name of the child (as it is shown on their birth certificate), their date of birth, and the city and state where the child was born.



There is enough space on this document for three children. If there are more than three children subject to this guardianship, use a separate piece of paper and attach it to this document.

In the boxes, provide the residential history for each child. Be sure to include the dates that the child lived at each address, the name of the adult who had custody of the child, and their relationship to the child.

Beginning on page 3, answer the questions provided:

Number 2: If you have been involved in any court case concerning any child listed above, check [] have and describe the situation. If not, check [] have not.

- Number 3: If you have any information about a current court case that is pending for any child listed above, check [] do and describe the court case that is pending. If not, check [] do not.
- Number 4: If you know of any person who wishes to have custody or who wants visitation with any child listed above, check [] do and describe the situation, including the child and the person who is wanting custody or visitation. If not, check [] do not.
- **Number 5:** Enter the child's biological (or adoptive) mother's information. Include the mother's name and address. If mother has passed away, write "deceased."
- **Number 6:** Enter the child's biological (or adoptive) father's information. Include the father's name and address. If father has passed away, write "deceased."



DO NOT SIGN this form except in front of a Notary Public. When you file the petition with the Court, the clerk may act as a Notary and may notarize your paperwork for free. You must call the Clerk of the Court at **(520) 724-3200** ahead of time and ensure that a Notary will be available at the Courthouse. A Notary will require a valid, government-issued picture ID (such as a driver's license) so that they can verify your identity.

The Notary Public will date the document and sign on their signature line. They will also fill out the line stating when their Commission Expires.

Y	our Name:			
Y	our Address:			
Y	our City, State, ZIP:			_
	our Telephone No:			<u></u>
R	epresenting Self, Withou	ut an Attorne y		
	IN THE	SUPERIOR COURT (OF ARIZONA, PIMA	COUNTY
Ir	the Matter of the Guard	ianship of:	Case No.	
_)	AFFIDAVIT REGA MINOR CHILDRE (A.R.S. §25-439)	
_	Minor(s))	Judge/Commissione	r
1.	Minor children subje	ct to this guardianshipar	re:	
C	HILD'S NAME:			
В	IRTH DATE:		BIRTHPLACE:	
	Dates of Residence Last Five Years	Address of Each Child During Residence Period	Name and Present Address of Person(s) Having Physical Custody of Child During Each Period	Relations hip to Child
	to present			
	to			
	to			
	to			

CHILD'S NAME:						
ŀ	BIRTH DATE:		BIRTHPLACE:			
	Dates of Residence Last Five Years	Address of Each Child During Residence Period	Name and Present Address of Person(s) Having Physical Custody of Child During Each Period	Relationship to Child		
	to present					
	to					
	to					
	to					
CHILD'S NAME:						
I	BIRTH DATE:		BIRTHPLACE:			
	Dates of Residence Last Five Years	Address of Each Child During Residence Period	Name and Present Address of Person(s) Having Physical Custody of Child During Each Period	Relationship to Child		
	to present					
	to					

	to				
	to				
2.	I [] have [] have not participated as a party, witness, or in any other capacity in any other litigation concerning custody of a child mentioned above in this or any other state. (If affirmative, state name of child, manner of participation, court, state and county (or district), case number, date of order or judgment, if any.)				
3.	I [] do [] do not have any information of any custody proceeding concerning a child mentioned above pending in a court of this or any other state (If affirmative, state name of each child, nature of proceeding, court, state and county (or district), case number, status of proceeding.)				
4.	I [] do [] do not know of any person not a party to this proceeding who has physical custody or claims to have custody or visitation rights with respect to any child mentioned above. (If affirmative, state name and address of person, whether physical custody, claiming custody rights, or claiming visitation rights, name of child involved.)				
5.	Mother's name and mailing address:				
6.	Father's name and mailing address:				

The undersigned swears or affirms that to the penalties of making a false affida	the statements set forth above are true and correct, subject avit or declaration.
Date	Petitioner's Signature
STATE OF ARIZONA)) ss.
COUNTY OF	
SUBSCRIBED AND SWORN TO bef	fore me on
My commission expires:	
_	Notary Public/DeputyClerk of Court