

IN THE DISTRICT COURT FOR THE CHOCTAW NATION OF OKLAHOMA

INSTRUCTIONS FOR GUARDIANSHIP - INCAPACITATED ADULT

1. Do NOT fill in the blanks on the example packet. Re-type all the forms of the packet.
2. Type the Petition for Guardianship on 8 ½" x 11" letter-size paper. Type on ONE SIDE ONLY of each page. Use as many or few pages as needed for your situation.
3. Consent must be signed by person for which you are seeking guardianship or a note from doctor as to why guardianship is needed.
4. The Letters of Guardianship and Order Appointing Guardian forms are what the Judge needs to sign to grant the guardianship. You can send these in with the Petition or bring them with you to court. If more than one person is asking to be appointed as guardians, paperwork should read "Co-Guardians" instead of "Guardian."
5. Names and addresses for all adult children of the subject MUST be provided. If no adult children, names and addresses of living parents of the subject; if no living parents, names and addresses of all adult siblings and all adult grandchildren of the subject MUST be provided.

ENCLOSE THE FOLLOWING WITH YOUR PETITION:

When you are ready to mail or personally bring your Petition for Appointment of a Guardian to be filed with the Court Clerk's office, you **MUST** bring the following in order to file your Petition:

1. Copy of your CDIB/membership card.
2. Information Sheet
3. Credit/debit card, cashier's check or money order for \$50.00 payable to **Choctaw Nation Judicial**. We cannot accept personal checks or cash.

If you have questions, you may call the Court Clerks office at (580) 920-7027. **Mail all correspondence to P.O. Box 1160, Durant, OK 74702.** If filing in person, you may use the Choctaw Nation District Court Clerk's office in Durant, located at 2250 Chukka Hina Drive **or** the Choctaw Nation Court Clerk's office in Talihina, located in the BIA Building at 302 Church Street.

One Time Credit Card Payment Authorization Form

Sign and complete this form to authorize Choctaw Nation to make a one-time debit to your credit card listed below.

By signing this form you give us permission to debit your account for the amount indicated. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

Please complete the information below:

I _____ authorize Choctaw Nation to charge my credit card
(full name)
account indicated below for \$50.00. This payment is for _____.
(description of services)

Billing Address _____ Phone# _____
City, State, Zip _____ Email _____

Account Type: Visa MasterCard AMEX Discover

Cardholder Name _____

Account Number _____

Expiration Date _____

SIGNATURE _____ DATE _____

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

IN THE DISTRICT COURT FOR THE CHOCTAW NATION OF OKLAHOMA

TYPE OF CASE

Guardianship Incapacitated Adult

PETITIONER'S INFORMATION

NAME: Last: _____ **First:** _____ **Middle:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

DATE OF BIRTH: _____

TELEPHONE: _____ **ALTERNATE NUMBER:** _____

E-MAIL: _____

TRIBAL AFFILIATION: _____

INCAPACITATED PERSON'S INFORMATION

NAME: Last: _____ **First:** _____ **Middle:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

DATE OF BIRTH: _____

TELEPHONE: _____ **ALTERNATE NUMBER:** _____

E-MAIL: _____

TRIBAL AFFILIATION: _____

IN THE DISTRICT COURT FOR THE CHOCTAW NATION OF OKLAHOMA

IN RE THE GUARDIANSHIP OF:

CASE NO. PGA-

An Incapacitated Person

PETITION FOR APPOINTMENT OF A GUARDIAN (CO-GUARDIANS)

COMES NOW _____, and petitions this Court for the appointment of a guardian of _____, and in support of his/her Petition, represents and shows to the Court:

1. That _____ is a resident of _____ County, State of Oklahoma, and located within the territorial jurisdiction of the Choctaw Nation of Oklahoma and is a member of the Choctaw Nation.

2. That Petitioner is a person interested in the welfare of _____, and is the (spouse, son, daughter, friend, etc.) and therefore, is entitled to petition this Court for appointment of a guardian.

3. That the Petitioner(s) have or have not been convicted of felony. If yes, please provide details:

4. That _____ is impaired by reason of _____

_____A letter from (doctor, psychologist, social worker) is attached hereto, marked Exhibit "A: and incorporated herein by reference thereto.

5. That this impairment results in his/her inability to receive and evaluate information effectively and meet the essential requirements for his/her physical health and safety, and manage his/her financial resources.

6. That _____ impairment is evidenced by his/her _____

7. That notice of this Petition shall be given to the following individuals:

NAME	RELATIONSHIP	ADDRESS
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8. That Petitioner asserts that the subject of the guardianship (is married, is not married) and has the following children:

9. That Petitioner knows of no persons or organizations nominated by will or other writing to serve as guardian, or limited guardian of _____.

10. That _____ (is, is not) receiving services from the Department of Children and Family Services.

11. That this Petition is not presented pursuant to the provisions of any Revised Uniform Veterans Guardianship Act, so notice to the Veterans Administration is not required.

12. That Petitioner is unaware of the existence or identity of the attorney representing _____.

13. That Petitioner is qualified as guardian of _____, and the Petitioner is not a minor, incapacitated, or partially incapacitated, nor a convicted felon, is not bankrupt, nor is he/she insolvent, or under any financial obligation to the Ward or subject to a conflict of interest which would preclude, or be substantially detrimental to his/her ability to act in the best interest of _____.

WHEREFORE, Petitioner respectfully requests that this Court set a date for hearing this Petition, order such notice as required by law and upon hearing this Petition, appoint Petitioner guardian of _____.

Petitioner
Address
Phone number

STATE OF OKLAHOMA

COUNTY OF _____

Before me, a Notary Public in and for said County and State, on this ____ day of _____ 20__, personally appeared _____, of lawful age, being first duly sworn upon oath state:

That _____ is the Petitioner above named; that he/she has read the above and foregoing Petition for Appointment of Guardian and understand the same; that the facts contained therein are true and correct.

Subscribed and sworn to before me this ____ day of _____, 20__.

Notary Public
My Commission Exp.: _____

IN THE DISTRICT COURT FOR THE CHOCTAW NATION OF OKLAHOMA

IN RE THE GUARDIANSHIP OF:

CASE NO: PGA-

An Incapacitated Person

CONSENT AND NOMINATION OF PROPOSED WARD

STATE OF OKLAHOMA

COUNTY OF

I, _____, now upon my oath understand that a Petition for Guardianship has been filed by _____ regarding myself in The District Court for the Choctaw Nation of Oklahoma. I also understand that I have the right to consult an attorney of my choice before signing this document and have elected not to do so.

I, _____, therefore waive any right that I may have to object to the issuance of Letters of Guardianship to _____ for myself. I sign this consent without any duress or coercion forcing me to do so and do so because I believe it to be in the best interest of myself. With this document, I nominate said _____ as guardian for myself. I further waive any further notice in this matter. I have signed this consent freely without fraud or duress and without promises of any monetary article. I am not under the influence of any alcohol or drugs.

(ward's name)

Subscribed and sworn to before me this _____ day of _____ 20__.

Notary
My Commission Exp:_____

IN THE DISTRICT COURT FOR THE CHOCTAW NATION OF OKLAHOMA

IN RE THE GUARDIANSHIP OF:

CASE NO. PGA-

An Incapacitated Person

LETTERS OF GUARDIANSHIP

_____ is hereby appointed guardian of the person of _____.
This guardianship will remain in effect until further order of the court. Witness the undersigned Judge of the District Court of Choctaw Nation this _____ day of _____, 20__.

Judge of Choctaw Nation District Court

STATE OF OKLAHOMA

COUNTY OF

I, _____, do solemnly swear that I will discharge all singular duties of Guardian of the person of _____, according to the law, and to the best of my ability. So help me God.

Guardian

Subscribed and sworn to me before this _____ date of _____, 20__.

Judge of Choctaw Nation District Court

IN THE DISTRICT COURT FOR THE CHOCTAW NATION OF OKLAHOMA

IN RE THE GUARDIANSHIP OF:

CASE NO: PGA-

An Incapacitated Person

ORDER APPOINTING GUARDIAN (CO-GUARDIANS)

This cause comes on for hearing of the Petition of _____ for her appointment as the guardian of the person above named. The Petitioner appears in person. The Court then called the case for trial and after reviewing the file, hearing the agreement of all matters as announced by the parties and after being otherwise fully advised in the premises, finds: The court has jurisdiction in this matter since the person is located in this jurisdiction and is a member of the Choctaw Nation and that it is in the best interest of person, that Petitioner be appointed as guardian.

IT IS THEREBY ORDERED, ADJUDGED AND DECREED BY THE COURT that _____ be appointed guardian of the person and property of _____, an incapacitated person, and Letters of Guardianship be issued to _____ upon her taking the oath required by law and bond is thereby waived.

Dated this _____ day of _____, 20__.

Judge of Choctaw Nation District Court