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|---|--|---------------------------|
| <b>Bay Mills Indian Community</b><br>BAY MILLS TRIBAL COURT<br>County of Chippewa | <b>PETITION FOR EMANCIPATION,<br/>                 AFFIDAVIT, AND WAIVER OF NOTICE</b> | <b>CASE NO. and JUDGE</b> |
|---|--|---------------------------|

Court address: 12449 W. Lakeshore Drive, Brimley MI 49715

Court telephone no. 906-248-8810/8811

In the matter of \_\_\_\_\_  
First, middle, and last name of the minor

Petitioner's name, address, and telephone no.

Petitioner's attorney, bar no., address, and telephone no.

1. My full name is \_\_\_\_\_ and my social security  
First, middle, and last name (type or print)  
 number is \_\_\_\_\_  
Put last 4 digits of SSN in Ref. No. row 10 on MC 97a.  
Last 4 digits

2. An action within the jurisdiction of a family division of state or tribal court involving the family or family members of the minor has been previously filed in \_\_\_\_\_ Court, Case Number \_\_\_\_\_, was assigned to Judge \_\_\_\_\_, and  remains  is no longer pending.

3. I am at least 17 years of age. I was born on \_\_\_\_\_ in \_\_\_\_\_  
Put DOB in Ref. No. row 10 on MC 97a.  
Date  
 County, \_\_\_\_\_ State. A certified copy of my birth certificate accompanies this petition.

4. The name(s) and last known address(es) of my parents, guardian, or custodian are:

| NAME | RELATIONSHIP | ADDRESS |
|------|--------------|---------|
|      | Parent       |         |
|      | Parent       |         |
|      | Guardian     |         |
|      | Custodian    |         |

5. I presently reside within this county at \_\_\_\_\_  
Street address  
 \_\_\_\_\_ and I have lived there continuously since \_\_\_\_\_  
City, state, zip Date

6. I am able to manage my own financial affairs as shown by the following facts: \_\_\_\_\_

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

I am employed by: \_\_\_\_\_

7. I am able to manage my personal and social affairs as shown by the following facts: \_\_\_\_\_

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

My housing arrangements are: \_\_\_\_\_

8. I have read the Emancipation of Minors laws (Bay Mills Tribal Code Chap. 7, Section 727), and I understand my rights and responsibilities as an emancipated minor.

**I REQUEST** the court to order my emancipation.

I declare under the penalties of perjury that this petition has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Minor's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney's signature

**AFFIDAVIT**

1. I am a \_\_\_\_\_, and I conduct business at or am employed at  
Occupation

\_\_\_\_\_  
Address City State Zip Telephone no.

2. I have personally known \_\_\_\_\_, a minor, for \_\_\_\_\_ years, and  
Name (type or print)

I have personal knowledge of his/her current circumstances.

3. I believe that emancipation would be in the best interests of the minor because of the following circumstances:

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

4. I have reviewed this petition, and I waive notice of hearing and any adjournment of the hearing.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of affiant

\_\_\_\_\_  
Name (type or print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, state, zip

\_\_\_\_\_  
Telephone no.

Subscribed and sworn to before me on \_\_\_\_\_ .  
Date

\_\_\_\_\_  
Deputy clerk/Notary public signature

My commission expires on \_\_\_\_\_ .

\_\_\_\_\_  
Name (type or print)

Notary public, State of Michigan, County of \_\_\_\_\_ .  Acting in the County of \_\_\_\_\_ .

This notarial act was performed using an electronic notarization system or a remote electronic notarization platform.