STATE OF NORTH DAKOTA	IN JUVENILE COURT	
COUNTY OF		_ JUDICIAL DISTRICT
IN THE INTEREST OF	, DOB	, A CHILD.
)	
))	
)	
)	

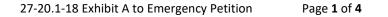
EXHIBIT A TO PETITION FOR EMERGENCY GUARDIANSHIP ADDITIONAL UNKNOWN, PRESUMED, OR ALLEGED FATHER(S)

1. The above-named child has other unknown, presumed, or alleged father(s), in addition to the father listed in the Petition for Appointment of Emergency Guardian(s). Information for each additional unknown, presumed, or alleged father is as follows:

2. (Choose one.)

□ The child **does not have** an unknown father or fathers. The child's additional presumed or alleged father(s) is/are listed on the following page(s).

□ The child has another unknown father or fathers. Petitioner has the following identifying information (*if no information, type "no information" in the space below*):



is (*choose one*) \Box alleged to be, or \Box presumed to be the child's father.

- a) The father's birth date is ______.
- b) (Choose one.)
 - The father is deceased. His date of death is ______.

A copy of the father's death certificate accompanies this petition.

(name of court),

(county), _____ (state). A certified copy of the court order

terminating the father's parental rights accompanies this petition.

□ The father is alive and his parental rights over the child **have not been**

terminated by court order. His last known phone number and address are:

Address:	

City, State, Zip Code: _____

Telephone number(s): _____

If the last known address and phone number of the father are not known,

provide detailed information describing the efforts to locate him:

- c) (Choose one.)
 - The father consents in writing to the appointment of emergency Guardian(s) and submits an affidavit indicating his consent and any limitations of the powers and duties of the emergency Guardian(s) under Section 27-20.1-15 of the North Dakota Century Code (N.D.C.C.). The father's affidavit of consent accompanies the Petition for Appointment of Emergency Guardian(s).

□ The father **does not** consent in writing to this emergency guardianship

4. (Choose one.)

 $\hfill\square$ There are no other presumed or alleged fathers.

□ There is another presumed or alleged father as follows:

		(full name)			
is (cho	ose one) \Box alleged to be, or \Box presumed to be the child's father.			
a)	Th	e father's birth date is			
b)	(Cł	noose one):			
		The father is deceased. His date of death is			
	A copy of the father's death certificate accompanies this petition.				
		The father's parental rights over the child were terminated by court order. His			
		parental rights were terminated (date) in			
		(name of court),			
		(county), (state). A certified copy of the court order			
		terminating the father's parental rights accompanies this petition.			
	The father is alive and his parental rights over the child have not been terminated by court order. His last known phone number and address are: Address:				
	City, State, Zip Code:				
		Telephone number(s):			
		If the last known address and phone number of the father are not known,			
		provide detailed information describing the efforts to locate him:			
		-			

c) (Choose one.)

The father consents in writing to the appointment of emergency Guardian(s) and submits an affidavit indicating his consent and any limitations of the powers and duties of the emergency Guardian(s) under Section 27-20.1-15 of the North Dakota Century Code (N.D.C.C.). The father's affidavit of consent accompanies the Petition for Appointment of Emergency Guardian(s).

The father **does not** consent in writing to this emergency guardianship

(The Petitioner signs.)	(The Co-Petitioner signs, if there is a Co- Petitioner. Otherwise, leave blank.)
Dated	Dated
Petitioner Signature	Co-Petitioner Signature
Petitioner Printed Name	Co-Petitioner Printed Name
Petitioner Address	Co-Petitioner Address
Petitioner City, State, Zip Code	Co-Petitioner City, State, Zip Code
Petitioner Telephone Number	Co-Petitioner Telephone Number