STATE OF NORTH DAKOTA	IN JUVENILE COURT
COUNTY OF	JUDICIAL DISTRICT
IN THE INTEREST OF	, DOB, A CHILD.
PETITIONER(S),)) Case No)
vs(child)(mother)(father) RESPONDENT(S).) AFFIDAVIT OF PARENT) CONSENTING TO GUARDIANSHIP)))
l,	(full name of parent), am
the (<i>choose one</i>) \Box mother or \Box father of the above state:	ve-named child, being first sworn, on my oath
1. I am aware of the petition of	
(petitioner's & co-petitioner's, if any, names) to be	come the guardian/co-guardian of my above-
named child.	
2. I understand that the guardianship is neede	ed because (<i>explain your understanding of</i>
the reasons for the guardianship):	

(Paragraph 2 continues on next page.)

3.	I belie	ve appointment of				
(proposed guardian & co-guardian, if any) is in the best interests of my above-named child, and						
l conse	ent to tl	he appointment.				
4.	I have reviewed, understand, and acknowledge the powers and duties required of a					
guardian under North Dakota Century Code Section 27-20.1-15 (N.D.C.C.), and (choose one):						
		I do not request any limitations on the duties.				
	OR					
		I request the duties be limited as follows:				
5.	l have	reviewed, understand and acknowledge the parenting time, contact and				
information the petitioner is requesting for me in the petition for guardianship and: (choose						
one)						
		I agree with the request.				
	OR					

(Paragraph 5 continues on next page.)

🗌 🛛 I do not	I do not agree and instead request the following parenting time, contact and			
formation:				
	Dated, 2	20		
	Juica, /			
	(Signature of Parent)			
	(orginature of Farency			
	(Printed Name of Parent)			
	(Address, City, State, Zip Code)			
	(Telephone Number)			
Stata of				
Lounty of:				
Signed and swo	n to before me on	, 20		
ру				
	Notary Public or Clerk of Court			
	If Notary, my commission expires:			