#### DISTRICT COURT OF THE KAW NATION

Drawer 50 698 Grandview Drive Kaw City, OK 74641 (580) 269-2552

This form packet is supplied by the Kaw Nation Court Clerk's Office. Nothing in these forms is to be construed as providing legal advice. It is highly recommended that you review these documents with an attorney. The Kaw Nation Court Clerk, Kaw Nation District Court, nor the Kaw Nation shall be liable for any use of the following forms.

Parties seeking an Order of the Court are responsible for completing all required documents. The Court Clerk cannot fill out the form for you nor can they give out legal advice. The Kaw Nation does not provide lawyers, legal advice, or legal assistance. If you need legal advice or representation, you must retain an attorney at your expense. Your selected Attorney **must** be registered to practice law with the Kaw Nation Bar Association prior to representing you in the Kaw Nation District Court. You may contact the Court Clerk for a current list of KNBA attorneys.

All fees, including service fees, must be paid at the time of filing. Fees cannot be waived unless a Paupers Affidavit has been filed and approved by the Judge prior to filing. This form may be requested from the Court Clerk.

#### **INSTRUCTIONS FOR FILING**

- 1. A filing fee of **\$75.00** is required when filing a Petition for Divorce. Most other filings are **\$50.00**. There is no cost to file a Protective Order. Please be prepared to inform the Court Clerk as to which type of Process Service you will be utilizing at the time of filing your packet.
- 2. All parties must be notified of the filing of a Petition and any pending hearings. Respondents are allowed twenty (20) days from service of a Petition to file an answer with the Court. It will be at least a month from your file date before a court date will be set unless the Respondent signs a Waiver. A Notice of Hearing and/or Summons may be served by Tribal Police within Kay and Osage County for a Service Fee of \$50.00. If the parties reside outside of the Kay and Osage County areas, a private process server may need to be hired for service at a starting rate of \$99.00. You will be billed for the remaining due amount.
- 3. The Notice may also be served through Certified Mail. A Service Fee of **\$17.00** will be assessed for the Court Clerk to mail the Notice.

- 4. It is required by law that Notice be given to the Respondent, so it is necessary to have a current mailing and physical address for this person. If you do not have an address, additional charges will need to be paid to obtain Notice by Publication in the local newspaper. THIS FEE CANNOT BE WAIVED AND WILL NEED TO BE PAID WHEN FILING FORMS. A fee of \$75.00 (average publication cost) will be accessed. Keep in mind that the fee assessed for publication is an average cost and it could cost more. If the cost is more than \$75.00, you will be responsible for the balance due at the end of publication.
- 5. To begin the filing process, the following required documents must be submitted to the Court Clerk:
  - Copy of your Driver's License (or State ID)
  - Copy of your Marriage Certificate
  - Copies of Birth Certificates
  - Copies of Death Certificates (if applicable)
  - Copies of CDIB Cards
  - Contact Information Sheet
  - Petition
  - Financial Affidavit (Divorce)
  - Statement of Facts (Guardianship)
  - OK Sex Offenders Registration Affidavit (Adoption, Custody and Guardianship)
  - Request for Hearing
  - Summons
  - Filing and Service fees: Cash or Money Order Payable to the Kaw Nation District Court
- 6. Please ensure that all required documentation has been attached and provided at the time of filing your Petition. Make sure that you completely fill out the documents and attach the required documentation. Documents that are not completely filled out can delay the process of your case. Parties are responsible for completing their own petition forms. The court clerk cannot give legal advice or assist you in filling out the forms.
- 7. Once your Petition and all required documentation has been received, an Order for Hearing will be issued by the Court Clerk informing all parties of the date and time of the scheduled hearing.
- 8. In an adoption, you MUST have an attorney. Also, once the Petition is filed, an in-home study must be completed before the adoption can be finalized (unless it is a step-parent adoption).

### **CONTACT INFORMATION**

Petitioner's Full Name:		
Previous Names:		
If Married, To Whom:	Date:	City/County/State:
Mailing Address (Including County):		
Physical Address (Including County):		
Work Address:		
Home Phone:		Work Phone:
Cell Phone:		Email:
DOB:		SSN:
Born in City/County/State:		Birth Certificate #:
DL No:		DL State:
Attorney:		
Respondent's Full Name:		
		City/County/State:
Mailing Address (Including County):		
Physical Address (Including County):		
Work Address:		
		Work Phone:
Cell Phone:		Email:
DOB:		SSN:
Born in City/County/State:		Birth Certificate #:
		DL State:
Attorney:		
If Married, To Whom:	Date:	City/County/State:
Mailing Address (Including County):		
Physical Address (Including County):		
Home Phone:		Work Phone:
Cell Phone:		Email:

DOB:	SSN:
Born in City/County/State:	Birth Certificate #:
DL No:	DL State:
Attorney:	

IN RE:	THE GUARDIANSHIP OF:	)
		) Case No. GD
An Inc	capacitated Person.	)
	PETITION FO	R APPOINTMENT OF A GUARDIAN
	COMES NOW	, and petitions this Court for the
appoi	ntment of a guardian of	, and in support of his/h
Petitio	on, represents and shows to th	e Court:
1.	That	(ward) is a resident of County, Sta
		ated within the territorial jurisdiction of the Kaw Nation
	is a member of	
2.		terested in the welfare of
	• •	ward and therefore, is entitled to petition this Court fo
	appointment of a guardian.	
3.		is impaired by reason of
		ogist, social worker) is attached hereto, marked Exhibit "A
4.	•	in his/her inability to receive and evaluate information ential requirements for his/her physical health and safet resources.
5.	<u> </u>	impairment is evidenced by his/her
6.	That notice of this Petition sh	all be given to the following individuals:
	Name	Relationship Address
7.		ne subject of the guardianship is/is not married and has th
	following children:	

8.	The Petitioner knows of no persons or org	anizations nominated by will or other writing
	to serve as guardian or limited guardian of	
9.	Thatis/is r	not receiving services from the Department of
	Children and Family Services.	
10	). That this Petition is not presented pursua	nt to the provisions of any Revised Uniform
	Veterans Guardianship Act, so notice to the	e Veterans Administration is not required.
11	. That Petitioner is unaware of the exister	nce or identity of any attorney representing
12	. That Petitioner is qualified as guardian	of, and the
		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 woul	d preclude, or be substantially detrimental to
	his/her ability to act in the best interest of	
Petitio		that this Court set a date for hearing on this upon hearing this Petition, appoint Petitioner
		Petitioner
		Street Address
		City, State, Zip

### **VERIFICATION**

STATE OF OKLAHOMA ) COUNTY OF )		
I,, do sole are true and correct.	emnly swear that the conten	ts and facts herein
	Petitioner's Signature	<u>-</u>
SUBSCRIBED AND SWORN to before me on this _	day of	, 20
	Notary Public	
Commission expires on:		

### STATEMENT OF FACTS BY PROPOSED GUARDIAN(S)

1.	Are you or is anyone living in your home currently charged with or been
	convicted of a crime? ( ) YES ( ) NO
2.	Are you or is anyone living in your home required to register as a sex
	offender? ( ) YES ( ) NO
3.	Have you or has anyone living in your home had a restraining order or
	protective order filed against him/her in the last ten (10) years? ( ) YES
	( ) NO
4.	Have you or has anyone living in your home been charged with, arrested
	for, or convicted of any form of child abuse, neglect or molestation? ( )
	YES ( ) NO
5.	Have you or has anyone living in your home had any reports alleging any
	form of abuse, neglect, or molestation made to any agency charged with
	protecting children (e.g. Oklahoma Child Protective Service or Kaw
	Nation Social Services) or any other law enforcement agency regarding
	him/her or anyone living within your home? ( ) YES ( ) NO
6.	Have you filed for or received protection under the federal bankruptcy
	laws? ( ) YES ( ) NO
7.	Have you ever had a license, certificate, permit, or registration required
	by the laws of any state for the practice of a profession or occupation
	suspended or revoked? ( ) YES ( ) NO
8.	Have you or anyone living in your home habitually used any illegal
	substances or abused alcohol? ( ) YES ( ) NO
9.	Have you ever been removed as a guardian in any other case? ( ) YES
	( ) NO
10.	Have you or anyone living in your home been charged with, arrested for,
	or convicted of a crime involving illegal substances or alcohol? ( ) YES

( ) NO

11.	Have you or anyone living in your home had a social worker, parole		
	officer, or probation officer assign	gned to him/her?() YES() NO	
12.	Have you or anyone living in you	r home received services from a	
	psychiatrist, psychologist, or the	erapist for a mental health related	
	issue?() YES() NO		
13. Do you or anyone living in your		home suffer from a mental illness? ( )	
	YES ( ) NO		
	VERIFI	CATION	
I/We	,	, proposed guardian(s)	
	n, being duly sworn to tell the trut	h and being of lawful age above	
_		y that the answers and information	
	of my/our knowledge and belief, u	Facts are in fact true and correct to the inder penalty of periury.	
	,	, , , ,	
Prop	osed Guardian (1) Printed Name	Proposed Guardian (2) Printed Name	
Prop	osed Guardian (1) Signature	Proposed Guardian (2) Signature	
	CERTIF	ICATION	
I, Da	wn Nicholas, Court Clerk/Adminis	trator/Deputy Clerk of the District	
Cour	t, certify that	and	
		personally appeared before me	
		and being duly sworn, executed the	
abov	e verification in my presence.		
Date	d this day of	, 202	

Court Clerk/Administrator/Deputy Clerk

, Petitioner,	) )	
vs.	)	Case No.
, Respondent.	)	
	OR	
IN RE:	) ) )	Case No
		K OFFENDER CT AFFIDAVIT
I am not a person subject to regist	tration ur	nder the Oklahoma Sex Offenders Registration
Act. I am not married to or living with suc	ch a perso	on, or a person who has been convicted of or
has charges pending for a felony or any re	elevant m	nisdemeanor, nor is anyone living with me or
frequently present in my home previously	y been co	onvicted of, or has charges pending for, a
felony or any relevant misdemeanor.		
		Petitioner's Signature
Subscribed and sworn to before me on the	nis d	day of,
		Notary Public
Commission Expires On:		
Commission No.:		

Official Form of the Kaw Nation

Petitioner,  vs.  Respondent.	) ) Case No
·	OR
IN RE: , DOB:	) ) Case No )
REC	QUEST FOR HEARING
Petitioner, Petitioner's Petition.	, requests this Court schedule a hearing on
Dated this day of	, 20
	Petitioner's Printed Name
	Petitioner's Signature

Petitioner, vs. Respondent	, ) ) ) ) ) , ) , )	Case No	
kespondent	<i>)</i> OR		
IN RE:  DOB:	) ,	Case No	
	SUMMO	<u>ONS</u>	
	THE KAW NA	TION TO:	
			_
			_
To the above-named Respondent:			
You are ordered and direct			
If you fail to appear and/or (20) days of receiving this Summor			
You may seek the advice of answer. Such attorney should be co		=	ed with this suit or your
Issued this day of		, 2024.	
		Court Cler	k

### **AFFIDAVIT OF SERVICE**

	SERVICE BY PROCESS	<u>S SERVER</u>		
	, hereby certify that I served this Summons			
together with a copy of the Petition upon at am/pm and made the return according to law, and that I am duly authorized				
to and area thi	<del></del>	ng to law, and that I a	m duly authorized	
to endorse thi	s affidavit, so help me God.			
		Police Officer/Pro	ocess Server	
C. da a au	:h - d + d + - h - f + h :-	da af	2024	
Subscr	ibed to and sworn to before me this	day of	2024.	
My commission	on expires:			
My commission	on number:			
	<u>CERTIFICATION OF SERV</u>	ICE BY MAIL		
I hereby certif	y that I mailed copies of the foregoing su	ımmons with a copy c	of the petition and	
order attached	d, to the following named parties at the a	address shown by cert	tified mail,	
	y, return receipt requested, on the attached hereto.	day of	, 2024, and	
Parties	Address Where Served	Date Rec	eipted	

**Court Clerk**