

**SAGINAW CHIPPEWA INDIAN TRIBE
PROBATE DIVISION
6954 East Broadway
Mt. Pleasant, MI 48858**

(989) 775-4800

**ANNUAL REPORT OF GUARDIAN
ON CONDITION OF MINOR**

FILE NO.

In the matter of _____, minor

1. I, _____, am the guardian of the above named minor and my annual
Name (type or print)
report is as follows:

2. Present age of the minor: _____ Minor's date of birth: _____

3. Living Arrangement

a. Current address and telephone number of the minor: _____

b. The minor's residence is: _____

guardian's home relative's home: _____ other: _____

Relationship

c. The minor has been in the present residence since _____ If moved within the past year, state
the changes and the reasons for change: _____ Date _____

d. I rate the minor's living arrangement as excellent. average. below average.

e. I believe the minor is content with the living situation. unhappy with the living situation.

f. I recommend a more suitable living arrangement for the minor as follows: _____

4. Physical Health

a. The minor's current physical condition is excellent. good. fair. poor.

b. During the past year the minor's physical condition has

remained about the same.

improved.

Explain _____

worsened.

Explain _____

c. During the past year the minor received the following medical treatment (include check-ups and optical and dental work):

Date	Ailment	Type of Treatment	Doctor's Name

(PLEASE SEE OTHER SIDE)

Do not write below this line - For court use only

5. **Education**

a. The minor regularly attends school at _____ and is in grade _____.
 b. The minor attends alternative education at _____ and is in grade _____.
 c. The minor does not attend school because _____.

6. **Activities of Minor**

a. The minor's social activities are: _____

b. The minor participates in the following sports: _____

c. During the past year the minor has been in counseling with _____
at _____

d. During the past year the minor received in-patient services at _____

7. **Parenting time** between the minor and parents was as follows:

a. Father _____
Father's current address: _____

b. Mother _____
Mother's current address: _____

c. Comments about parenting time: _____

8. Parents complied with the court structured plan limited guardianship placement plan as follows:

Changes should be made to the plan as follows:

9. The guardianship should should not be continued because: _____

10. I am am not willing to continue to serve as guardian.

11. As guardian, I have been ordered by the court to file an annual account which is attached.

Date _____

Signature of guardian _____

Address _____

City, state, zip _____

Telephone no. _____