

STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	PETITION FOR EMANCIPATION, AFFIDAVIT, AND WAIVER OF NOTICE	FILE NO.
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In the matter of the emancipation of _____, a minor

1. My full name is _____ and my social security number is _____.
First name, middle name, and last name (type or print)

2. An action within the jurisdiction of the family division of circuit 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 16 years of age. I was born on _____ in _____ County, _____ State. A certified copy of my birth certificate is attached to this petition.
Date

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

NAME	RELATIONSHIP	ADDRESS
	Father	
	Mother	
	Guardian	
	Custodian	

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

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

I am employed by: _____

(PLEASE SEE OTHER SIDE)

Do not write below this line - For court use only

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 (Michigan Compiled Laws 722.1 through 722.6), and I understand my rights and responsibilities as an emancipated minor.

I REQUEST the court to order my emancipation.

I declare 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

Attorney signature

Name (type or print) Bar no.

Address City State Zip Telephone no.

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 I have
Name (type or print)
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 _____, _____ County, Michigan.
Date

My commission expires: _____ Signature: _____
Date Notary public