



WYANDOTTE NATION DISTRICT COURT
WYANDOTTE NATION DISTRICT COURT
FILED in The Office of the Court Clerk

NOV 04 2020
2:58 PM KE

Date

[Handwritten Signature]
Court Clerk

In the Matter of:)
)
Guardianship of Incapacitated)
Adult Packet)
)
)

ADM-20-2

ADMINISTRATIVE ORDER

NOW on this 4th day of November, 2020, in the District Court of the Wyandotte Nation, the Court approves the following packet to be issued by the Court Clerk's office to the public for pro se applicants for guardianship of an incapacitated adult.

[Handwritten Signature]
Judge Jon Douthitt

GUARDIANSHIP OF INCAPACITATED ADULT PACKET



IN THE DISTRICT COURT OF WYANDOTTE NATION

**Wyandotte Nation Courts
64700 E. Hwy 60
Wyandotte, Ok 74370**

**Court Clerk Phone: 918-678-6342
Court Administrator Phone: 918-678-6394
Fax: 918-678-2005**

The forms in this packet are to be used as a template, if you are seeking a Guardianship of an Incapacitated Adult. Please read the instructions carefully before completing the forms. The Court Clerk CANNOT accept a Petition that is not filled out completely.

Should you need assistance in preparing the Petition, you must consult with an Attorney at your own expense. This court does not have Legal Aid. The Court Clerk is prohibited by Ethical Code and Court Rules to provide legal advice and help parties prepare or type court documents. Different situations may require special procedures and the Court Clerk CANNOT advise you on how to proceed or what forms may be necessary in specific situations.

Packet contains:

1. Instructions
2. Flow Chart
3. Petition
4. Entry Of Appearance & Waiver



IN THE DISTRICT COURT OF WYANDOTTE NATION

INSTRUCTIONS

**PETITION FOR GUARDIANSHIP OF INCAPACITATED ADULT
IMPORTANT INFORMATION-PLEASE READ!**

1. Petition for Guardianship of Incapacitated Adult must be filled out completely to the best of your knowledge and ability.
2. Petition for Guardianship of Incapacitated Adult must be signed in front of the Court Clerk or a Notary Public when you are ready to file.
3. Filing fees, copy fees, etc., must be made in the form of **CASH, CASHIER'S CHECK, MONEY ORDER, OR CREDIT CARD** and must be payable to "**Wyandotte Nation Courts**". Filing fees **MUST** be paid at the time of filing your Petition. If you are unsure of the amount of filing fees, contact the Court Clerk.
4. Submit original Petition for Guardianship of Incapacitated Adult and a copy for each of the interested parties, who has NOT signed an Entry of Appearance and Waiver and a copy for you, if you want a copy of the Petition for Guardianship of Incapacitated Adult for your records. If the Court Clerk makes any copies, you will be charged \$1.00 for the first page and \$.50 for each additional page.

<u>FILING FEES-GUARDIANSHIP OF INCAPACITATED ADULT</u>	<u>FEE</u>
Petition for Guardianship of Incapacitated Adult	\$75.00
Service (Certified Mail)	\$13.00
Service (Tribal PD)	\$30.00
Service (Process Server)	\$50.00

NOTE-THERE IS NO SERVICE FEE ON THE INTERESTED PARTY(IES) THAT AGREE TO SIGN AN ENTRY OF APPEARANCE AND WAIVER

OFFICE HOURS: 8:00AM-12:00PM and 1:00PM-4:30PM, MONDAY-FRIDAY

Mailing Address: Wyandotte Nation Courts
64700 E. Hwy 60
Wyandotte, Ok 74370

Physical Address: 14325 Porcupine Rd.
Wyandotte, Ok 74370

Telephone: Court Clerk: 918-678-6342
Court Administrator: 918-678-6394

Fax: 918-678-2005

GUARDIANSHIP FLOW CHART: Guardianship Process

"PETITION FOR GUARDIANSHIP" - The petitioner prepares and files the petition with the Court Clerk. This is the document filed by the petitioner to start the guardianship action.

If Entry of Appearance & Waiver(s) is NOT filed with the Petition for Guardianship.



"SUMMONS" - The Court Clerk will prepare *summons* to all interested parties advising him/her that they have 30 days to answer to the petition.

"SERVICE OF PROCESS" - Serve all interested parties with a copy of petition and summons sent by certified mail, served by Tribal PD or Process Server.

"ANSWER" - Respondent must respond to the petition within 30 days. The *answer* states whether or not the respondent agrees with the petition. If the respondent doesn't file an answer, the Court assumes that the respondent agrees to the terms in the petition.

"NOTICE OF HEARING" - The petitioner and all interested parties will receive a *notice of hearing* advising the parties of the scheduled guardianship hearing date and time.

"GUARDIANSHIP HEARING" - The Judge will review the case file and ask a few basic factual questions to the petitioner and interested parties. The Judge will rule on matters of the case and will act in the best interest of the incompetent adult in determining guardianship.

"GUARDIANSHIP ORDER" - The petitioner will receive a certified guardianship order in the mail 2 weeks after the hearing. The guardianship order is an official document of the decision of the Judge.

"ANNUAL GUARDIANSHIP REVIEW" - Annually you will receive notice of hearing advising the parties of the scheduled review hearing date and time to review the guardianship case.

If Entry of Appearance & Waiver(s) (for ALL interested parties) is filed with the Petition for Guardianship



"NOTICE OF HEARING" - The Court Clerk will fill out and give you a hearing date for the next available hearing.





WYANDOTTE NATION DISTRICT COURT

IN THE MATTER OF THE)
GUARDIANSHIP OF:)

_____,)
DOB: _____;)
INCAPACITATED ADULT)

CASE NO: _____

PETITION FOR GUARDIANSHIP OF INCAPACITATED ADULT

COMES NOW, _____, Petitioner herein *pro se*, and for this cause of action the Petitioner alleges and states the following:

1. That _____, incapacitated adult herein, is/is not an enrolled member of the Wyandotte Nation.
2. That the incapacitated adult is _____ years old and was born on _____.
3. That the incapacitated adult resides at _____ (address, city, state, & zip) and has lived at this address for _____ (months/years).
4. That the Petitioner is:
 _____ an enrolled member of the Wyandotte Nation
 _____ is an enrolled member of the _____ Tribe.
 _____ is non-Indian.
5. That the Petitioners resides at _____ (address, city, state, & zip) And has lived at this address for _____ (months/years).
6. That according to the Petitioner's knowledge, the incapacitated adult, does not have a Court appointed guardian and a guardian needs to be appointed for the reason that: _____



WYANDOTTE NATION DISTRICT COURT

IN THE MATTER OF THE)
GUARDIANSHIP OF:)

DOB:)
INCAPACITATED ADULT)

CASE NO: _____

ENTRY OF APPEARANCE AND WAIVER

I, the undersigned relative of _____, being one of the persons having a right to the appointment of guardianship over the person of _____, do hereby waive my rights to said appointment in favor of _____, the Petitioner herein, and I respectfully pray that the Court will appoint Petitioner, as guardian over the above-listed person and estate. Should I object to said appointment of the Petitioner, I am aware that I had the right to file an Answer to said Petition and appear in Court to make my objections known and that I waive that right.

Dated this ___ day of _____, 20 ____.

Signature

Please print your name & address:

Telephone: _____

SHOULD YOU AGREE TO SIGN THIS WAIVER, PLEASE SIGN IN FRONT OF A NOTARY PUBLIC OR COURT CLERK AND RETURN TO THIS OFFICE EITHER BY MAIL OR IN PERSON.

State of Oklahoma;)
County of _____)

Before me, the undersigned Notary Public, came _____ this ___ day of _____ 20 ____, to me known to be the identical person who executed the above and foregoing Entry of Appearance and Waiver, and personally acknowledged to me that he/she has read, understood, and signed the same, and that he/she executed the same as his/her free and voluntary act and deed for the uses and purposes therein set forth. IN WITNESS THEREOF I have hereunto affixed my signature and official seal the date heretofore stated.

SEAL

NOTARY PUBLIC

My Commission Expires: _____

SUBSCRIBED AND SWORN TO BEFORE ME THIS ___ DAY OF _____, 20 ____.

COURT CLERK/DEPUTY