

Your Name: _____
Address: _____
City, State, Zip _____
Telephone: _____
Email Address: _____
Self-Represented

DISTRICT COURT
_____ **COUNTY, NEVADA**

In the Matter of the Parental Rights as to:
(*children's names*)

Minor Child(ren).

CASE NO.: _____

DEPT: _____

PETITION TO TERMINATE PARENTAL RIGHTS

Petitioner (*your name*) _____ respectfully requests the termination of the parental rights as detailed below, pursuant to NRS Chapter 128.

1. Petitioner. I am the (*check one*) mother / father / legal guardian / other
(*describe your relationship*) _____ to the children.

2. Children and Parents.

Child's Name	Date of Birth	Place of Birth (City/State)

The children live at the following address: _____
Address

City, State, Zip Code

Children's Mother:

Name

Address

City, State, Zip Code

If the mother's address is unknown, fill out the information below.

The mother's nearest known adult relative is (*such as a parent, sibling, etc.*):

Name Relationship

Address

City, State, Zip Code

Children's Father:

Name

Address

City, State, Zip Code

If the father's address is unknown, fill out the information below.

The father's nearest known adult relative is (*such as a parent, sibling, etc.*):

Name Relationship

Address

City, State, Zip Code

3. Termination. The court should terminate the parental rights of the (*check one or both*)
 mother / father listed above.

4. Legal Guardian (*A legal guardian is someone other than a parent who has been appointed by a court or the parents (in writing) to care for the child.*) (*check one*)

The children do not have a legal guardian.

The children do have a legal guardian. The guardian is:

Name

Address

City, State, Zip Code

5. Caretaker. The children currently live with and are being cared for by: (*check one*)

The mother Other: _____

Name

The father

The legal guardian

6. UCCJEA Declaration. (*check one*)

- The children have lived in Nevada for the past six months, or since birth.
- The children have NOT lived in Nevada for the past six months or since birth.

a. **Living Arrangements Last 5 Years.** The children have lived with the following people in the following places within the last five years:

Time Period (mo/yr – mo/yr)	Name of Person the Children Lived With	City and State	Child’s Name (if not all children)
_____ - present			
_____ - _____			
_____ - _____			
_____ - _____			
_____ - _____			

The names and current addresses of each non-parent the children lived with during the last five years are: _____

b. **Participation in Other Cases:** (*check one*)

I have / have not participated as a party or witness or in some other capacity in any other case involving the children. If you have, provide all specifics including the state, the court, children involved, the case number and the date of the child custody order, if any:

c. **Knowledge of Other Cases:** (*check one*)

I do / do not know of a different case that could affect the current case. If you do, provide all specifics including the state, the court, parties involved, the case number and the nature of the proceeding: _____

d. **Person(s) Who Claim Custody / Visitation:** (*check one*)

I do / do not know of anyone other than the parents who has physical custody of the children or who claims custody/visitation rights to the children. If you do, list names and addresses of anyone who claims custody/visitation rights: _____

7. **Parental Fault.** Parental rights should be terminated because (*check all that apply*):

Abandonment. The parent's conduct shows that the parent intends to give up all rights to the child. Specifically, the parent has not provided for the children's support and has not communicated with the children since (*approximate date the parent last had any contact with the children*) _____. Further proof of abandonment includes (*explain*): _____

Neglect. The parent has refused to provide proper food, clothing, shelter, education, medical care, or other necessary care for the children's physical, emotional, and emotional needs as follows (*explain*): _____

Unfitness. The parent has failed to provide the children with proper care, guidance, and support because of the parent's fault, habit, or conduct as follows (*explain*): _____

Risk of Harm. The children would be at risk of serious physical, mental, or emotional injury if they were returned to the parent as follows (*explain*): _____

Token Efforts. The parent has made only token efforts to care for the children as follows (*explain*): _____

Sexual Assault. The child was conceived as a result of a sexual assault for which the natural parent was convicted.

8. Best Interest. It is in the children's best interest to terminate parental rights because (*explain in detail*):

9. American Indian Child. Upon information and belief: (*check one*)

- No, the children are not known to be American Indian children.
- Yes, the children are known to be American Indian children.

10. Public Assistance. (*check one*)

- No, the children and I do not receive public assistance.
- Yes, I or the children currently receive public assistance.

11. Name Change. If the parental rights are terminated: (*check one*)

- No, the children's names should not be changed.
- Yes, the children's names should be changed to (*full new name(s) suggested*)

Petitioner requests:

1. That the Court grant the relief requested in this Petition; and
2. That the Court grant Petitioner sole legal and sole physical custody of the children; and
3. For such other relief as the Court finds to be just and proper.

DATED this (*day*) _____ day of (*month*) _____, 20____.

Submitted By: (*your signature*) ▶ _____
(*print your name*) _____

VERIFICATION

Under penalty of perjury, I declare that I am the Petitioner in the above-entitled action; that I have read the foregoing Petition and know the contents thereof; that the pleading is true of my own knowledge, except for those matters therein contained stated upon information and belief, and that as to those matters, I believe them to be true.

I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.

DATED this (*day*) _____ day of (*month*) _____, 20____.

Submitted By: (*your signature*) ▶ _____
(*print your name*) _____