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| **STATE OF WISCONSIN, CIRCUIT COURT,** **COUNTY** | |  |
| IN THE INTEREST OF    Name    Date of Birth | Amended  **Petition for Termination**  **of Parental Rights**  Case No. |

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| I state on information and belief that the following is true: (If unknown or cannot be ascertained, so state) | | | | | |
| 1. | Petitioner’s Name and Address | | | | |
|  | Child’s Address | | Name(s) of Foster Parent or Other Physical Custodian | | Child’s Sex  Female   Male |
| Child has previously been adopted?  Yes  No County where child is present at time of filing Petition: | | | | |
| Parent #1’s Name | Parent #1’s Address | | Birthdate | |
| Parent #2’s Name | Parent #2’s Address | | Birthdate | |
| Child’s Legal Guardian | Legal Guardian’s Address | | | |
| Child’s Legal Custodian | Legal Custodian’s Address | | | |
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| 2. | The petitioner is interested as       . | | | | |
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| 3. | The child is a  marital  non-marital child. | | | | |
|  |  | | | | |
| 4 | The above-named father is  adjudicated  presumed  alleged  biological (nonadjudicated)  unknown. | | | | |
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| 5. | The petitioner seeks termination of parental rights of |
|  | Parent #1 who  will  may  will not consent to the termination of his/her parental rights under §48.41, Wis. Stats. |
|  | If involuntary, grounds for termination of parental rights exist under §48.415 (      ), Wis. Stats.  A statement of the facts and circumstances which support these grounds is as follows:  **See attached** |
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|  | Parent #2 who  will  may  will not consent to the termination of his/her parental rights under §48.41, Wis. Stats. |
|  | If involuntary, grounds for termination of parental rights exist under §48.415 (      ), Wis. Stats. |
|  | A statement of the facts and circumstances which support these grounds is as follows:  **See attached** |
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| 6. | Names and addresses of additional possible fathers, if known, are attached. The statutory grounds for termination of the parental rights of each possible father (known or unknown) and the facts and circumstances which support these grounds are attached. | | | |
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| 7. | A. | The child is not subject to the federal Indian Child Welfare Act. | | |
|  |  | OR | | |
|  | B. | It is unknown at this time whether the child is subject to the federal Indian Child Welfare Act.  (*For an Indian Child, use the Indian Child Welfare Act version (IW-1630) of this form.)* | | |
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| 8. | The Uniform Child Custody Jurisdiction Act Affidavit is attached to this Petition. | | | |
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| 9. | The best interests of the child will be served by termination of the parental rights of the parent(s). | | | |
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| 10. | The best interests of the minor birth parent(s) will be served by the termination of  his  her  their parental rights. | | | |
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| ▶  Petitioner    Name Printed or Typed    Address    Email Address Telephone Number    Date State Bar No. (if any) | | | | ▶  Petitioner    Name Printed or Typed    Address    Email Address Telephone Number    Date State Bar No. (if any) |
| Name of Attorney | | | |  |
| Address | | | |
| Email Address | | | |
| Telephone Number | | | Bar Number |