STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	REPORT AFTER INVESTIGATION OF JUVENILE GUARDIANSHIP	CASE NO.

Court address

Court telephone no.

1. In the matter of name, alias(es), DOB

2. I, _____ (Name (type or print)), have investigated this juvenile guardianship as ordered by the court.

☐ 3. I visited the juvenile guardian on _____ (Date) at _____ (Location).

☐ I did not visit the juvenile guardian because _____.

☐ 4. I visited the child on _____ (Date) at _____ (Location).

☐ I did not visit the child because _____.

5. The juvenile guardian has adequately provided for the welfare of the child to the following extent:

_____

6. The juvenile guardian ☐ is ☐ is not willing to continue to provide for the welfare of the child.

7. The juvenile guardian ☐ has ☐ does not have the ability to continue to provide for the welfare of the child.

8. This juvenile guardianship ☐ is ☐ is not necessary for the following reasons:

_____

9. If the juvenile guardianship is continued, the effect on the welfare of the child will be as follows:

_____

10. The following factors should be considered for the welfare of the child:

_____

☐ 11. Child protective services has been involved in this juvenile guardianship as follows:

_____

12. **I RECOMMEND** that

☐ a. this juvenile guardianship be continued without modification. ☐ I request that a hearing be scheduled.

☐ b. this juvenile guardianship be continued with the following modifications: _____

_____

☐ I request that a hearing be scheduled.

Date

Signature

USE NOTE: This report is used only for investigations ordered pursuant to MCR 3.979(D)(2).

Do not write below this line - For court use only