

FAMILY COURT OF THE STATE OF NEW YORK  
COUNTY OF

.....  
In the Matter of the Commitment of  
Guardianship and Custody pursuant to  
§384-b of the Social Services Law of

Docket No.

PETITION

\_\_\_\_\_  
A Child under the Age of Eighteen Years,  
Alleged to be Without a Living Parent

.....  
TO THE FAMILY COURT:

The undersigned Petitioner(s) respectfully alleges that:

1. Petitioner(s) \_\_\_\_\_,  
(is)(are)(an authorized agency)(an appointed law guardian) (an appointed guardian ad litem)  
(foster parent(s)) having (its office and place of business) (his)(her) (their)(residence) at  
\_\_\_\_\_, in the County of \_\_\_\_\_, State of New  
York.

2(a). \_\_\_\_\_ is a (fe)male child under the age of  
eighteen years, born on \_\_\_\_\_, at \_\_\_\_\_, who now resides  
at \_\_\_\_\_ in the County of \_\_\_\_\_, State of  
New York.

2(b). The subject child (is)(is not) a Native American child subject to the Indian Child  
Welfare Act of 1978 (25 U.S.C. §1901-1963).

3. (Upon information and belief) (B)(b)oth parents of the child are dead, and no  
guardian of the person of the child has been lawfully appointed.

[Attach evidence in support of the allegation of the death of the parents.]

4. The full names and the addresses of the custodian of the child are:

Name

Last Known Address

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

5. The name and the address of each other interested party who should be afforded notice of this proceeding are:

Name

Last Known Address

_____	_____
_____	_____
_____	_____

and there are no persons other than those set forth entitled to notice of this proceeding.

6. The child came into the care of \_\_\_\_\_, an authorized agency on the \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_, under the following circumstances: [include docket number, of child abuse or neglect proceeding pursuant to Article 10 of the Family Court Act, if any]

7. The best interests of the child will be promoted by commitment of the guardianship and custody of the child to \_\_\_\_\_, (an authorize agency)(foster parent(s)) for the following reasons:

8. No previous application has been made to any court or judge for the relief sought herein (except \_\_\_\_\_).

WHEREFORE, your Petitioner prays for an order determining that the above-named child is a child whose parents are deceased and for whom no guardian has been lawfully appointed, and committing the guardianship and custody of the child to (an authorized agency) (foster parent(s)), and for such other and further relief as in the interests of the child may be granted.

Dated: \_\_\_\_\_, 19 \_\_\_\_ .

\_\_\_\_\_  
(Agency) (Foster parent)  
(by  
Name \_\_\_\_\_  
Title \_\_\_\_\_)

\_\_\_\_\_  
Print or type name

\_\_\_\_\_  
Signature if Attorney, if any

\_\_\_\_\_  
Attorney's Name ( Print or Type)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Attorney's Address and telephone Number

VERIFICATION

STATE OF NEW YORK )  
 ) ss.:  
COUNTY OF )

, being duly sworn, says that (s)he is the  
Petitioner in the above-named proceeding and that the foregoing Petition is true to (his) (her) own  
knowledge, except as to matters therein stated to be alleged on information and belief and as to  
those matters (s)he believes it to be true.

\_\_\_\_\_  
Petitioner

Sworn to before me this  
day of , 19 .

\_\_\_\_\_  
Notary Public