



**HABEMATOLEL POMO OF UPPER LAKE TRIBAL COURT**

635 E. Highway 20 Upper Lake, CA 95485

Phone: 707.900.6917

[Http://www.hpultribe-nsn.gov](http://www.hpultribe-nsn.gov)

**IN THE TRIBAL COURT  
OF THE HABEMATOLEL POMO OF UPPER LAKE**

In re: \_\_\_\_\_,

) Case Number: \_\_\_\_\_

)  
) *To be assigned by Court*

) **PETITION FOR PROTECTION**

**PROTECTION FOR:**

State the name, date of birth, sex, residence and tribal affiliation of the minor or incompetent person for whom protection is requested.

\_\_\_\_\_  
\_\_\_\_\_

**JURISDICTION:**

Please explain the grounds, upon which the Court has jurisdiction, ie: Minor is a Tribal member.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ALLEGATIONS:**

Explain the facts related to allegations of abuse, neglect or abandonment. Include the date, time and location at which the alleged facts occurred.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ADDITIONAL FACTS REVELANT TO THIS ACTION:**

Names, residences and tribal affiliation of the child's parents, guardians or custodians, if known:

Names, relationship and residences of members of the child's extended family and former caregivers, if known.

With whom child resides; if other than parent(s), facts necessitating placement and date of placement, if known:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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**RELIEF:**

State what you are asking from the Court:

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DATED: \_\_\_\_\_

\_\_\_\_\_  
Petitioner

*Attach additional sheets as needed.*