

State of Minnesota

District Court

County _____

Judicial District: _____
Court File Number: _____
Case Type: Parental Notification

In the Matter of the Petition of:

**Report of the
Guardian Ad Litem or Petitioner**

Date of Birth: _____

I. MEDICAL INFORMATION

- 1. Has the Petitioner been examined by a physician? Yes No
Date: _____
- 2. Have the abortion procedures and the medical risks been explained? Yes No
- 3. Have the aftercare procedures been explained and understood? Yes No
- 4. Has the Petitioner been informed and does Petitioner understand what to do if medical complications occur? Yes No
- 5. Has the Petitioner given a true statement of her medical history to the physician? Yes No
- 6. Did Petitioner’s physician advise her of any additional risks to her health as a result of her medical history? Yes No
- 7. Has the Petitioner given informed consent to the abortion? Yes No

II. COUNSELING INFORMATION

- 1. Has Petitioner received counseling regarding having an abortion? Yes No
If yes, name and agency of counselor;

- 2. Has Petitioner received counseling as to pregnancy alternatives?
 - a. abortion Yes No
 - b. adoption Yes No

- c. marriage Yes No
- d. single parenthood Yes No
- 3. Does Petitioner feel she needs more counseling as to her decision to
 - a. have an abortion? Yes No
- 4. Has Petitioner been counseled as to possible emotional and psychological
 - a. Problems she may experience after the abortion? Yes No
- 5. Has Petitioner been counseled as to the methods of contraception that
 - a. are available? Yes No

III. PERSONAL INFORMATION

- 1. Does Petitioner wish to have an abortion? Yes No
- 2. Has Petitioner been coerced by any other party as to this decision? Yes No
- 3. Petitioner elects not to notify her parent(s) because:

- 4. Does Petitioner live with her parents? Yes No
- 5. What is Petitioner's source of financial income?

- 6. Is Petitioner attending school? Grade _____ Yes No
- 7. What is the highest school grade level Petitioner has completed? _____
- 8. Is Petitioner employed? Yes No
- 9. Place of employment:

Address

Job title: _____

- 10. What are Petitioner's plans for the future (schooling, employment, etc.)?

11. State any additional information Petitioner wishes to bring to the court's attention relative to the proposed abortion:

Dated: _____

Guardian Ad Litem on behalf of Petition or Petitioner

Relationship to Minor

IV. RECOMMENDATION OF THE GUARDIAN AD LITEM

A. Authorization to the physician without parental notification is recommended because:

B. The minor is mature and capable of giving an informed consent, as evidenced by:

C. The minor is not mature, but the proposed waiver of parental notification is in her best interests because:

D. It is not recommended that authorization be granted because:

Dated: _____

Guardian Ad Litem