Name	
Address	
City, State, Zip	
Phone	
Email	
I am [ ] Intervenor [ ] Attorney for intervenor (Utah Bar #:	)
In the Juvenile	e Court of Utah
Judicial District	t County
Court Address	
State of Utah, in the interest of:	Indian Child Welfare Act – Motion to Intervene (25 USC 1911 and Utah Rule of Juvenile Procedure 50(f))
Last name, first name	Case Number
Date of birth	Judge
A minor [ ] under [ ] over 18 years of age, and [ ] represented [ ] not represented.	
Theasks to intervene in this proceeding as the above.	(name of tribe), a federally recognized tribe, Indian tribe of the child or children named

I declare under criminal penalty under the law of Utah that everything stated in this document is true.			
Signed at		(city, and state or country).	
	Signature ▶		
Date	Printed Name		

## **Certificate of Service**

I certify that I filed with the court and am serving a copy of this Motion to Intervene on the following people.

Person's Name	Service Method	Service Address	Service Date		
	[ ] Mail				
	[ ] Hand Delivery				
	[ ] Email				
	Left at business (With person in charge				
	or in receptacle for deliveries.)				
	Left at home (With person of suitable				
	age and discretion residing there.)				
	[ ] Mail				
	[ ] Hand Delivery				
	[ ] Email				
	[ ] Left at business (With person in charge				
	or in receptacle for deliveries.)				
	[ ] Left at home (With person of suitable				
	age and discretion residing there.)				
	[ ] Mail				
	[ ] Hand Delivery				
	[ ] Email				
	[ ] Left at business (With person in charge or in receptacle for deliveries.)				
	Left at home (With person of suitable				
	age and discretion residing there.)				
	[ ] Mail				
	[ ] Hand Delivery				
	[ ] Email				
	Left at business (With person in charge				
	or in receptacle for deliveries.)				
	[ ] Left at home (With person of suitable				
	age and discretion residing there.)				
	[ ] Mail				
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	[ ] Left at business (With person in charge				
	or in receptacle for deliveries.)				
	[ ] Left at home (With person of suitable age and discretion residing there.)				
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Signature ▶					
Date	B				
	Printed Name				