



Case No: \_\_\_\_\_

5. I believe I am \_\_\_\_\_ weeks pregnant or my expected due date is \_\_\_\_\_.
6. I want to terminate my pregnancy by abortion.
7. \_\_\_\_\_ I am mature and capable of giving informed consent to the proposed abortion; AND/OR **[both paragraphs 6 and 7 may be checked, if applicable]**
8. \_\_\_\_\_ It is in my best interests to have an abortion without the consent of my parent(s), guardian, or conservator.

For the reasons above stated, I respectfully request that this Court authorize a physician to perform an abortion at my request, without the consent of a parent, guardian, or conservator.

DATE: \_\_\_\_\_

\_\_\_\_\_  
(Petitioner's signature, using true name OR  
fictitious name OR initials)