

**Petition for Declaration of Emancipation  
of a Minor**

(12/01/20) CCCO 0027 A

---

---

**IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS  
COUNTY DEPARTMENT, COUNTY DIVISION**

In re the matter of the Emancipation of:

_____	Case No. _____
A Mature Minor	
A Homeless Minor	

**PETITION FOR DECLARATION OF EMANCIPATION OF A MINOR**

1. Name of the Petitioner: \_\_\_\_\_  
Parent      Guardian      Next Friend (Select one. Minor cannot file Petition on their own behalf.)

2. Name of Minor Child: \_\_\_\_\_

3. Child's Date of Birth: \_\_\_\_\_ Age now: \_\_\_\_\_

4. The Minor Child:

Resides at (address) \_\_\_\_\_ within  
Cook County, Illinois; or

Was found in Cook County, Illinois at (location) \_\_\_\_\_ ;  
or

Owens property at \_\_\_\_\_ in Cook  
County, Illinois;  
or

Is a party to a proceeding pending in the Circuit Court of Cook County,

Case \_\_\_\_\_, which affects the interest of the minor. (Attach a copy of the Complaint/Petition/Motion which identifies the minor as a party and demonstrates that the interest of the minor will be affected. NOTE: If the proceeding is pending in the Child Protection Section or the Juvenile Justice Division of this Court no Petition for Declaration of Emancipation will be granted.)

5. The Minor Child is a:

Mature Minor, as defined by 750 ILCS 30/3-2, because of the following facts (detail):

---

---

---

---

OR

Homeless Minor, as defined by 750 ILCS 30/3-25, because of the following facts (detail):

---

---

---

---

---

That on behalf of the homeless minor the following efforts at family reunification were undertaken (detail):

---

---

---

That the youth transitional housing program willing and able to provide services and shelter or housing to the minor is:

Name of Program \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

If you need additional space to answer any portion of section 5, please attach a separate sheet.

6. The Mother of the Minor is (Name and Address):

---

7. The Father of the Minor is (Name and Address):

---

**Petition for Declaration of Emancipation  
of a Minor**

(12/01/20) CCCO 0027 C

8. The Minor      does      does not (choose one) have a Guardian

Name and Address of Guardian or Custodian: (State names and addresses of Guardian and Custodian, if appropriate)

---

---

9. The Minor is not the subject of any proceeding in the Child Protection or Juvenile Justice Division of the Circuit Court of Cook County, Illinois.

10. The Minor is not the ward of any court.

11. The Minor has been living wholly or partially independent from parents/legal guardian since (insert date): \_\_\_\_\_

Wherefore your Petitioner, on behalf of the Minor Child, requests this Court enter a Declaration of Emancipation consistent with the grounds set out in this Petition.

/s/ \_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

Under the penalties of perjury as provided for in section 1-109 of the Code of Civil Procedure, the undersigned states the facts contained in this Petition for Declaration of Emancipation of a Minor are true and correct.

Atty. No.: \_\_\_\_\_

Atty Name: \_\_\_\_\_

Atty. for: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Primary Email: \_\_\_\_\_

/s/ \_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name