State of Minnesota
Gobolka Minnesota

District Court
Probate Division
Maxkamadda Degmada
Qeybta Dhaxal-qeybinta

County/Deegaanka	

Judicial District: Garsoorka Degmada:	
Court File No.: Lambarka Feylka Maxkamadda:	
Case Type: Nooca Kiiska:	Guardianship/Conservatorship Masuul/Qof Maxkamad Qabatay

In Re: the Guardianship of
Jawaab: Masuulka

_____

Personal Well-Being Report
Warbixinta Fayaqabka Shakhsiga

(Annual Report of Guardian)
(Warbixinta Sannadka ee Masuulka)

Minn. Stat. § 524.5-316
Sharciga Minn. Stat. § 524.5-316

This annual Personal Well-Being Report is for the reporting period from/Warbixintan ah Warbixinta Fayaqabka Shakhsiga ee sannadka waa warbixinta xilliga ee laga bilaabo ____ _____to/ilaa _____.

The Guardian (You)
Masuulka (Adiga)

Your name, and the address and phone number where you can be contacted:
Magacaaga, cinwaankaaga iyo lambarka taleefanka lagaala soo xiriiri karo:

Name/Magaca: _____

Street Address:
Cinwaanka jidka: _____

City, State and Zip Code:
Magaalada, Gobolka,
Lambarka Boostada Xaafadda
(Zip): _____

Taleefanka/Taleefanka: _____ Type/Nooca: _____

Email/Boostada Intarnetka
(Email): _____

The Person Subject to Guardianship
Qofka Masuulka Laga yahay

1. **Current Address**. The current address and living arrangement of the person subject to guardianship:
   Cinwaankeygu hadda. Cinwaanka hadda iyo meesha uu ku nool yahay Qofka Masuulka Laga yahay:

Street Address:
Cinwaanka jidka: _____

City, State and Zip Code:
Magaalada, Gobolka,
Lambarka Boostada
Xaafadda (Zip): _____

Living Arrangement:
Sida uu u Nool yahay: _____

2. **Previous Addresses**. Has the person subject to guardianship lived at any other address during this reporting period?
   Cinwaanno Hore. Miyuu Qofka Masuulka Laga yahay ku noolaa cinwaan kale xilliga warbixinta wakhtigan? ☐ Yes/Haa ☐ No/Maya

If **Yes**/Haddii aad ku jawaabtay **Haa**:

Street Address:
Cinwaanka jidka: _____

City, State and Zip Code:
Magaalada, Gobolka, Lambarka
Boostada Xaafadda (Zip): _____

Living Arrangement:
Sida uu u Nool yahay: _____

Date Range Person Subject to
Guardianship Lived Here:
Taariikhaha Qofka Masuulka
Laga yahay Halkan Deggenaa: _____

If there is more than one previous address, add another sheet.
Haddii ay jiraan cinwaanno badan, waraaq kale ku soo qor.

Current Conditions/Xaaladaha Hadda

For questions #3 through #5, rate the **current** mental, physical, and social conditions of the person subject to guardianship by choosing a number on a scale of 1 to 5 (1 = very poor, and 5= excellent). Then give a brief explanation of why you rated the way you did.
Su'aalaha #3 ilaa #5, qiimee **hadda** maskax ahaan, jir ahaan, iyo xaaladaha bulsho ahaaneed ee qofka masuulka laga yahay oo waa inaad kala doorato 1 ilaa 5 (1 = mid aad u xun, iyo 5 = mid aad u fiican). Ka dibna qof sharraxaad sababta aad sidaas ugu qiimeysay.

3. How do you rate their current **mental** condition?
   Sidee baad hadda u qiimeyneysaa **maskax ahaan** xaaladda?

1	2	3	4	5
○	○	○	○	○
Very poor Mid aad u xun				Excellent Mid aad ufiican

   The reason you gave this rating: _____
   Sababta aad sidaas ugu qiimeysay:

4. How do you rate their current **physical** condition?
   Sidee baad hadda u qiimeyneysaa **jidh ahaan** xaaladda?

1	2	3	4	5
○	○	○	○	○
Very poor Mid aad u xun				Excellent Mid aad ufiican

   The reason you gave this rating: _____
   Sababta aad sidaas ugu qiimeysay:

5. How do you rate their current **social** condition?
   Sidee baad hadda u qiimeyneysaa **bulsho ahaan** xaaladda?

1	2	3	4	5
○	○	○	○	○
Very poor Mid aad u xun				Excellent Mid aad ufiican

   The reason you gave this rating:
   Sababta aad sidaas ugu qiimeysay: _____

The Guardianship
Masuuliyadda

6. **Contact/Kala xiriir**.
   a. In the last year, how often have you had contact with the person subject to guardianship?
      Sannadkii ugu dambeeyey, sidee baad inta badan ula xiriireysay qofka aad masuulka ka tahay?
      - ☐ Daily/Maalin kasta
      - ☐ Weekly/Toddobaadkiiba mar
      - ☐ Monthly/Bishiiba mar
      - ☐ Other/Si kale: _____

b. How do you usually contact the person subject to guardianship?
Sidee baad badanaa ula xiriirtaa qofka aad masuulka ka tahay?

- ☐ In person/Inaan u tago
- ☐ By telephone/Taleefan ahaan:
- ☐ By text/Qoraalka taleefanka
- ☐ By email/Boostada intarnetka
- ☐ Other/Wax kale: _____

Services/Adeegyo

Questions #7 through #10 ask whether the person subject to guardianship received any **medical, educational, vocational,** or **other services** in the last year.
Su'aalaha #7 ilaa #10 waxay ku saabsan yihiin haddii qofka masuulka laga yahay helay wax ah **daaweyn, waxbarasho, tababarid,** ama **adeegyo kale** sannadkii ugu dambeeyey.

7. Did the person receive any **medical services** in the past year?
Miyuu qofku helay wax ah **adeeg daawo** sannadkii ugu dambeeyey?
☐ Yes/Haa ☐ No/Maya

If **Yes**/Haddii aad ku jawaabatay **Haa**:
Describe/Faahfaahi:_____
Were the medical services adequate?
Miyey kugu filnaayeen adeegyada daawada?
☐ Yes/Haa
☐ No, because/Maya, sababtoo ah: _____

8. Did the person receive any **educational services** in the past year?
Miyuu qofku helay wax ah **adeeg waxbarasho** sannadkii ugu dambeeyey?
☐ Yes/Haa ☐ No/Maya

If **Yes**/Haddii aad ku jawaabtay **Haa**:
Describe/Faahfaahi:_____
Were the educational services adequate?
Miyey kugu filnaayeen adeegyada waxbarashada?
☐ Yes/Haa
☐ No, because/Maya, sababtoo ah: _____

9. Did the person receive any **vocational services** in the past year?
Miyuu qofku helay wax ah **adeeg tababar ah** sannadkii ugu dambeeyey?
☐ Yes/Haa ☐ No/Maya

If **Yes**/Haddii aad ku jawaabatay **Haa**:
Describe/Faahfaahi:_____

Were the vocational services adequate?
Miyey kugu filnaayeen adeegyada tababarka ah?

☐ Yes/Haa
☐ No, because/Maya, sababtoo ah: _____

10. Did the person receive any **other services** in the past year?
Miyuu qofku helay wax ah **adeeg kale** sannadkii ugu dambeeyey?

☐ Yes/Haa ☐ No/Maya

If **Yes**/Haddii aad ku jawaabtay **Haa**:

Describe/Faahfaahi:_____
Were the other services adequate?
Miyey kugu filnaayeen adeegyada kale?

☐ Yes/Haa
☐ No, because/Maya, sababtoo ah: _____

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11. **Restrictions.** Did you place any restrictions on the right of the person subject to guardianship to communicate with and visit with anyone?
Mamnuucid. Miyey jireen wax aad ka mamnuucday qofka masuulka laga yahay in uusan dad la xiriirin dad soo booqan?

- Having visitors/Dadka soo booqanaya;
- Making or receiving telephone calls
  Dirista ama in uu dirsado taleefan;
- Sending or receiving personal mail
  Dirista waraaqo shakhsi ah ama in loo soo diro;
- Sending or receiving electronic communications (including through social media); and/or
  Dirista ama helidda farriimaha intarnetka (sida baraha bulshada ee ay dadku ku wada xiriiraan); iyo/ama
- Participating in social activities.
  Ka-qeyb qaadashada xiriirka bulshada.

☐ Yes/Haa ☐ No/Maya

If **Yes**/Haddii aad ku jawaabtay **Haa**:

Did you provide written notice of the restrictions to the following?
Ma u gudbisay waxyaabaha mamnuuca ka ahaa oo qoran?

Court Maxkamadda	☐ Yes/Haa	☐ No/Maya
Person subject to guardianship Qofka masuulka laga yahay	☐ Yes/Haa	☐ No/Maya
Person subject to the restriction Qofka ku lug leh waxa la mamnuucayo	☐ Yes/Haa	☐ No/Maya

12. **Payment for Services/Lacagta hawsha adeegga ah**.

a. Have you received any payment for services to the person subject to guardianship in the past year?
Lacag ma lagugu siiyey adeegyada masuuliyadda ah ee aad qof u haysay sannadkii hore?
☐ Yes/Haa ☐ No/Maya

If **Yes**/Haddii aad ku jawaabtay **Haa**:

How much did you receive? $ _____
Immisa ayaa lagugu siiyey?

Was any of this money paid by county contract?
Miyey lacagtaasi ahayd mid lagu bixiyey heshiis degmo?

☐ Yes, and the amount paid was/Haa, oo lacagta la i siiyey waxay ahayd $_____

☐ No/Maya

b. **Guardian's Current Rate.** List the current rate you charge, or enter $0 if you do not charge for your services:
Lacagta Hadda Masuulku Qaato. Qor lacagta aad hadda qaadato, ama $0 haddii aadan lacag ku qaadan adeegyada: $_____ per/lacagta _____ (hour, day, etc./saacaddii, maalintii, iwm.)

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13. **Continuation or Changes to the Guardianship**. *Any information you include here is so that the court knows your opinion about the guardianship. This is not a formal request to change or end the guardianship (there are other forms available at www.mncourts.gov/forms (choose "Guardianship/Conservatorship" category) for making these requests.*
Sii-socoshada lacagta ama Beddelaadda Masuuliyadda. *Wixii macluumaad ah oo halkan ku qoran waa wax ay maxkamaddu ka ogaaneyso fikraddaada masuuliyadda. Ma aha codsi rasmi ah oo lagu beddelayo ama lagu joojinayo masuuliyad (waxaa jira foomam kale oo aad ka heli karto www.mncourts.gov/forms (dooro Nooca "Masuul/Ilaaliye") markaad soo direyso codsiga noocaas ah.*

a. Do you believe the person should still be under guardianship?
Ma rumeysan tahay in qofku weli u baahan yahay masuul in laga ahaado?
☐ Yes/Haa ☐ No/Maya
Explain/Faahfaahi: _____

_____

b. Do you think the guardianship should be changed? ☐ Yes/Haa ☐ No/Maya
Ma waxaad rumeysan tahay in masuuliyadda la beddelo?

Explain/Faahfaahi: _____

_____

14. Are you a professional guardian? ☐ Yes/Haa ☐ No/Maya
Adigu xirfadle ahaan ma tahay qof masuul ka noqda carruur?

Under Minnesota law, a professional guardian means a person acting as guardian for three or more people who are not related to the guardian by blood, adoption, or marriage.
Sida uu dhigayo sharciga Minnesota, xirfadlaha masuul ka noqda carruur macnaheedu waa masuulka saddex ama in ka badan oo dad ah oo aysan ka dhaxeyn dhiig, korsasho sharci ah, ama in uu guur dhex maray.

Everything I have stated in this report is true and correct.
Wax kasta oo aan warbixintan ku sheegay waa run iyo wax sax ah.

_____ _____

Dated/Taariikhda

Signature of Guardian/Saxiixa Masuulka

Name
Magaca: _____

Address
Cinwaanka: _____

City/State/Zip
Magaalada/Gobolka/Lambarka Boostada
Xaafadda (Zip) _____

Telephone
Taleefanka: _____

Email
Boostada Intarnetka
(Email): _____

Each year, this report must be given to the person subject to guardianship and to interested persons of record with the court within 30 days after the anniversary of the appointment of the guardian. If the Personal Well-Being Report is not filed within 60 days of the due date, the court shall issue an Order to Show Cause.
Sannad kasta, warbixintan waa in la siiyo qofka masuulka laga yahay iyo dadka daneynaya ee diiwaanka ugu jira maxkamad 30 cisho gudahood ka dib markay ka soo wareegato sannadguurada magacaabista masuuliyadda. Haddii aan Warbixinta Fayaqabka Shakhsiga ah lagu soo gudbin 60 cisho gudahood ilaa kama-dambeysta, maxkamaddu waxay soo saareysaa Amar ah Sababta in la Arko.

An interested person may notify the court in writing that they do not want to receive copies of annual reports as required by law. There is a *Waiver of Notice* form (GAC110) online at www.mncourts.gov/forms (choose the "Guardianship/Conservatorship" category).
Qofkii daneynaya wuxuu maxkamadda ku soo ogeysiin karaa qoraal ahaan in uusan qofku rabin koobbiyada warbixinta sannadka oo waa shuruud sharci ah. Waxaa jira *Iska-dhaafidda Ogeysiiska oo ah* foom (GAC110) oo laga heli karo www.mncourts.gov/forms (dooro nooca "Masuuklka/Ilaaliyaha").