

State of Minnesota

District Court

County of: _____

Court File Number: _____

Judicial District: _____

Case Type: Guardianship/Conservatorship

In Re the Guardianship and Conservatorship of:

Respondent

Petition for Appointment of Guardian and Conservator (GAC503)

Note: This is a petition to ask the Court to appoint a Guardian **and** a Conservator for the Respondent. It is based on Minn. Stat. §§ 524.5-303 and 524.5-403, which state what must be included in a petition.

- If you want to ask for only a Guardian, do not use this form. Use GAC505 instead.
- If you want to ask only for a Conservator, do not use this form. Use GAC507 instead.

Interpreter Information

When requested, the Court may provide an interpreter at a Guardianship and Conservatorship hearing.

Do you, the Respondent, or any participant need an interpreter at a hearing in this case?

- ☐ No
☐ Yes

If yes, list the name of each person that needs an interpreter and what language is needed.

Information about Petitioner

1. Petitioner's Name and Contact Information

First Name: _____

Middle Name: _____

Last Name: _____

Address: _____

City, State, Zip: _____

Phone number: _____

Email address: _____

2. Why did you take on the responsibility to file this Petition? _____

3. What is your relationship to the Respondent?
- ☐ Family – describe: _____
- ☐ Friend – describe: _____
- ☐ Other – describe: _____

Information about Respondent

4. **Respondent's Full Name, Date of Birth, and Primary Language**

- a. Respondent's Full Name

First Name: _____

Middle Name: _____

Last Name: _____

- b. What name does Respondent usually go by? _____

- c. Respondent's Date of Birth: _____

- d. Respondent's Primary Language: ☐ English **or** ☐ Other: _____

5. **Respondent's Address and Contact Information**

- a. Respondent's Phone Number: _____

- b. Respondent's Home Address: _____

City, State, Zip: _____

- c. What type of residence is this? **Check all that apply:**

☐ Private home (for example, a house or apartment)

☐ Facility:

☐ Group home

☐ Assisted living facility

☐ Nursing Home

What is the name of the agency or company operating the facility?

What is the name of the administrator of the facility?

☐ Other: _____

Note: The Respondent's "home address" is their principal address (where they usually live). Answer the questions below to let the Court know if the Respondent is currently in a different, temporary, location (such as a hospital, nursing home, acute care center, etc.).

d. Is Respondent currently staying at their home address listed above?

☐ No ☐ Yes

If no, list the address where Respondent is temporarily staying:

Name of Facility: _____

Administrator's Name: _____

Address: _____

City, State, Zip: _____

Type of Facility or Residence: _____

Information about People Interested in Respondent

Names and addresses of any individuals who may be related to or interested in the Respondent's well-being.

6. Is the Respondent married?

☐ **No**, the Respondent is not married.

Has Respondent lived with an adult for more than 6 months before the filing of this Petition?

☐ No (Respondent has not lived with another adult for more than 6 months before the filing of this Petition).

☐ Yes. Respondent lives or lived with the following adult:

Name: _____

Address: _____

City, State, Zip: _____

or

☐ **Yes**, the Respondent is married.

Name of Respondent's Spouse: _____

Street Address: _____

City, State, Zip: _____

7. Respondent's Relatives.

Use more paper if you need more space.

- a. Does Respondent have any **adult children or stepchildren**?

☐ No ☐ Yes

If yes, list the names and addresses of the Respondent's adult children and stepchildren:

Name: _____

Address: _____

City, State, Zip: _____

Relationship: ☐ Adult child ☐ Adult stepchild

Name: _____

Address: _____

City, State, Zip: _____

Relationship: ☐ Adult child ☐ Adult stepchild

Name: _____

Address: _____

City, State, Zip: _____

Relationship: ☐ Adult child ☐ Adult stepchild

If you answered " Yes " to #7(a), you do not have to answer (b) and (c). Skip to #8.

- b. There are 2 main questions in #7(b) – and each asks for follow-up information.

Question: Does Respondent have a parent who is still living? ☐ No ☐ Yes

If yes, list the names and addresses of the Respondent's living parents:

Parent: _____

Address: _____

City, State, Zip: _____

Parent: _____

Address: _____

City, State, Zip: _____

Question: Does Respondent have any adult siblings? ☐ No ☐ Yes

If yes, list the names and addresses of the Respondent's adult siblings:

Name of adult sibling: _____

Address: _____

City, State, Zip: _____

Name of adult sibling: _____

Address: _____

City, State, Zip: _____

Name of adult sibling: _____

Address: _____

City, State, Zip: _____

If you answered "Yes" to #7(b), you do not have to answer (c). Skip to #8.

- c. List the name and address of the Respondent's closest relative who can be found.

Name: _____

Address: _____

City, State, Zip: _____

Relationship: _____

8. Respondent's Current Legal Representatives (if any).

If the answer to any of the following is "yes," give the name and address of the legal representative.

- a. Does Respondent have a **court-appointed guardian**?

☐ Unknown ☐ No

☐ Yes:

Name of Respondent's court-appointed guardian: _____

Court-appointed guardian's address: _____

City, State, Zip: _____

Court File Number: _____

If the court order is from someplace other than Minnesota, include a copy of the order with this Petition.

- b. Does Respondent have a **court-appointed conservator**?

☐ Unknown ☐ No

☐ Yes

Name of Respondent's court-appointed conservator: _____

Court-appointed conservator's address: _____

City, State, Zip: _____

Court File Number: _____

If the court order is from someplace other than Minnesota, include a copy of the order with this Petition.

- c. Does Respondent have a **representative payee** for Social Security (sometimes called a "rep payee")?

☐ Unknown ☐ No

☐ Yes

Name of rep payee: _____

Rep payee's address: _____

City, State, Zip: _____

- d. Does Respondent have a **trustee** or a **custodian of a trust or custodianship**?

☐ Unknown ☐ No

☐ Yes

Name of trustee or custodian: _____

Trustee or custodian's address: _____

City, State, Zip: _____

- e. Does the Respondent have an **attorney-in-fact** appointed through a "Power of Attorney"?

☐ Unknown ☐ No

☐ Yes

Name of attorney-in-fact: _____

Attorney-in-fact's address: _____

City, State, Zip: _____

- f. Does the Respondent have a **Health Care Agent** appointed through a "Health Care Directive"?

☐ Unknown ☐ No

☐ Yes

Name of Health Care Agent: _____

Health Care Agent's address: _____

City, State, Zip: _____

g. Does the Respondent have any **other legal representative**?

☐ Unknown ☐ No

☐ Yes

Name of Respondent's legal representative: _____

Legal representative's address: _____

City, State, Zip: _____

How is this person a legal representative for Respondent? _____

Less Restrictive Means

- Minnesota law says that a judicial officer cannot appoint a guardian or conservator **unless** the Respondent's identified needs cannot be met by less restrictive means. In this Petition, you must tell which less restrictive means have been considered, which have been attempted (and for how long), and how these less restrictive means were not sufficient to meet the Respondent's identified needs.
- Use more paper if you need more space.

9. Less Restrictive Means

a. **Appropriate technological assistance:**

Describe: _____

Was the use of technological assistance attempted?

☐ **No**

The use of technological assistance was not attempted because:

or

☐ **Yes**

How long was technological assistance attempted? _____

Why wasn't the use of technological assistance sufficient to meet the Respondent's needs? _____

b. Supported decision making:

Describe: _____

Was the use of supported decision making attempted?

☐ **No:**

The use of supported decision making was not attempted because:

or

☐ **Yes:**

How long was supported decision making attempted? _____

Why wasn't the use of supported decision making sufficient to meet the Respondent's needs? _____

c. Community or residential services:

Describe: _____

Was the use of community or residential services attempted?

☐ **No** The use of community or residential services was not attempted because:

or

☐ **Yes:**

How long was the use of community or residential services attempted?

Why wasn't the use of community or residential services sufficient to meet the Respondent's needs? _____

d. **Appointment of a health care agent** under Minn. Stat. § 145C.01, subd. 2:

Describe: _____

Was the use of an appointed health care agent attempted?

☐ **No:** The use of an appointed health care agent was not attempted because:

or

☐ **Yes:**

How long was the use of an appointed health care agent attempted?

Why wasn't the use of an appointed health care agent sufficient to meet the Respondent's needs? _____

e. **Representative payee** (also called "rep payee"):

Describe: _____

Was the use of a representative payee attempted?

☐ **No:** The use of a representative payee was not attempted because:

or

☐ **Yes:**

How long was the use of a representative payee attempted? _____

Why wasn't the use of a representative payee sufficient to meet the Respondent's needs? _____

f. **Trusts:**

Describe: _____

Was the use of trusts assistance attempted?

☐ **No.** The use of trusts was not attempted because: _____

or

☐ **Yes:**
How long was the use of trusts attempted? _____

Why wasn't the use of trusts sufficient to meet the Respondent's needs?

g. Banking or bill-paying assistance:

Describe: _____

Was the use of banking or bill-paying assistance attempted?

☐ **No.** The use of banking or bill-paying assistance was not attempted because:

or

☐ **Yes:**
How long was the use of banking or bill-paying assistance attempted?

Why wasn't the use of banking or bill-paying assistance sufficient to meet the Respondent's needs? _____

h. Appointment of an attorney-in-fact under Minn. Stat. § 523.01:

Describe: _____

Was the use of an appointed attorney-in-fact attempted?

☐ **No.** The use of an appointed attorney-in-fact was not attempted because:

or

☐ **Yes:**

How long was the use of an appointed attorney-in-fact attempted?

Why wasn't the use of an appointed attorney-in-fact sufficient to meet the Respondent's needs? _____

i. **Protective arrangement** under Minn. Stat. § 524.5-412:

Describe: _____

Was the use of a protective arrangement attempted?

☐ **No.** The use of a protective arrangement was not attempted because:

or

☐ **Yes:**

How long was the use of a protective arrangement attempted? _____

Why wasn't the use of a protective arrangement sufficient to meet the Respondent's needs? _____

j. **Other less restrictive means considered or attempted:**

Type of Less Restrictive Means Considered or Attempted: _____

Why wasn't this sufficient to meet the Respondent's needs?

Type of Less Restrictive Means Considered or Attempted: _____

Why wasn't this sufficient to meet the Respondent's needs? _____

Type of Less Restrictive Means Considered or Attempted: _____

Why wasn't this sufficient to meet the Respondent's needs? _____

Nominations

10. **Respondent's nominations.** Has the Respondent nominated or named anyone to be their guardian and/or conservator? ☐ No ☐ Yes

If Yes, list the name, address, and phone number of each person nominated (named) by Respondent to be their guardian and/or conservator:

Name of Respondent's Nominee: _____

☐ Guardian ☐ Conservator

Street Address: _____

City, State, Zip: _____

Phone Number: _____

Email: _____

Name of Respondent's Nominee: _____

☐ Guardian ☐ Conservator

Street Address: _____

City, State, Zip: _____

Phone Number: _____

Email: _____

Name of Respondent's Nominee: _____

☐ Guardian ☐ Conservator

Street Address: _____

City, State, Zip: _____

Phone Number: _____

Email: _____

11. Is the Respondent a person with developmental disabilities or dependent and neglected ward of the Commissioner of Human Services? ☐ No ☐ Yes

12. Is the Respondent under the temporary custody of the Commissioner of Human Services? ☐ No ☐ Yes

13. Respondent's Income and Assets.

- According to Minn. Stat. §§ 524.5-303 and 524.5-403, the Petition must include information about "Respondent's property with an estimate of its value, including any insurance or pension, and the source and amount of any other anticipated income or receipts."
- Give details about Respondent's assets and income (write "none" if Respondent does not own a particular asset or have that type of income):

Homestead:

Value or Amount: \$ _____

Details: _____

Insurance

Value or Amount: \$ _____

Details: _____

Other Real Estate

Value or Amount: \$ _____

Details: _____

Pension or Retirement

Value or Amount: \$ _____

Details: _____

Money (cash on hand or in accounts)

Value or Amount: \$ _____

Details: _____

Income

Value or Amount: \$ _____

Details: _____

Investments

Value or Amount: \$ _____

Details: _____

Other

Value or Amount: \$ _____

Details: _____

Personal Property

Value or Amount: \$ _____

Details: _____

Information about the Proposed Guardian

14. Proposed Guardian's Name and Contact Information

Is the proposed Guardian also the Petitioner (listed in #1)? ☐ No ☐ Yes

If No, give the following information about the proposed Guardian:

Name: _____

Street Address: _____

City, State, Zip: _____

Phone: _____

Email: _____ or ☐ None

15. Who nominated this proposed **Guardian**? (Check all that apply)

☐ Respondent

☐ Respondent's parent

☐ Respondent's spouse

☐ Proposed Guardian (self-nominated)

☐ Other: _____

16. Was the proposed **Guardian** previously appointed as Guardian of the Respondent by a court order?

☐ No

☐ Yes (list the Court File Number: _____)

17. Why is the proposed **Guardian** the most suitable and best qualified among those available and willing to serve as guardian?

18. Does the proposed **Guardian** provide any of the following to the Respondent **for a fee**?

Residence:

☐ No ☐ Yes

Custodial Care

☐ No ☐ Yes

Medical Care

☐ No ☐ Yes

Employment Training

☐ No ☐ Yes

Any Other Care or Services

☐ No ☐ Yes

If Yes to any of the above, is the proposed **Guardian** related to Respondent by blood, marriage, or adoption? ☐ No ☐ Yes

Note: According to Minn. Stat. § 524.5-309(c), a person or agency that provides the services listed above to the respondent for a fee may not be appointed as guardian unless they are related to the respondent by blood, marriage, or adoption.

19. Are you asking that the Court appoint more than 1 guardian (the other proposed guardians would be called “co-guardians”)? ☐ No ☐ Yes

If Yes, fill out one *Co-Guardian Attachment* (GAC502-Co-G) for each Proposed **Co-Guardian**.

Reasons Why a Guardianship Is Needed

- Minnesota law says that, in this Petition, you must tell why the guardianship is needed (including giving a description of “the nature and extent” of Respondent’s incapacity).
- Minn. Stat. § 524.5-102, subd. 6, defines incapacity:
"Incapacitated person" means an individual who, for reasons other than being a minor, is impaired to the extent of lacking sufficient understanding or capacity to make personal decisions, and who is unable to meet personal needs for medical care, nutrition, clothing, shelter, or safety, even with appropriate technological and supported decision-making assistance.

20. Describe Respondent’s conditions, impairments, and/or behaviors that affect Respondent’s ability to understand, communicate, and meet their personal needs.

21. How will a guardianship help the Respondent?

Powers of the Guardian – Minn. Stat. § 524.5-313

The Court will grant to a guardian only those powers necessary to meet the Respondent's demonstrated needs.

22. What powers are needed for a Guardian to protect and supervise the Respondent? Choose "**All Powers**" to Guardian or "**Limited Powers**" to Guardian.

- ☐ **All Powers to Guardian.** The Court should grant to the Guardian the power and duty to exercise all rights and powers under Minn. Stat. § 524.5-313(c) on behalf of the Respondent. **Explain why the Court should not limit the Guardian's powers:**

OR

- ☐ **Limited Powers to Guardian.** The Court should grant to the Guardian the power and duty to exercise the following rights and powers under Minn. Stat. § 524.5-313(c):

Check the boxes to tell the Court which powers and duties Petitioner is asking the Court to grant to the Guardian:

- a. ☐ Have custody and establish the place of abode of the Person Subject to Guardianship within or outside Minnesota. Minn. Stat. § 524.5-313(c)(1).
- b. ☐ Provide for the care, comfort, and maintenance needs of the Person Subject to Guardianship. Minn. Stat. § 524.5-313(c)(2).
- c. ☐ Take reasonable care of the clothing, furniture, vehicles, and other personal effects of the Person Subject to Guardianship. Minn. Stat. § 524.5-313(c)(3).
- d. ☐ Give any necessary consent to enable, or to withhold consent for, the Person Subject to Guardianship to receive necessary medical or other professional care, counsel, treatment, or service. Minn. Stat. § 524.5-313(c)(4).
- e. ☐ Approve or withhold approval of any contract, except for necessities, which the Person Subject to Guardianship may make or wish to make (**only given if no conservator is appointed**). Minn. Stat. § 524.5-313(c)(5).
- f. ☐ Exercise supervisory authority over the Person Subject to Guardianship, but may not restrict the right of the Person Subject to Guardianship to communicate,

visit, or interact with others, including receiving visitors, making or receiving phone calls, sending or receiving personal mail, sending or receiving electronic communications including through social media, or participating in social activities, unless the guardian has good cause to believe a restriction of communication, visitation, or interaction is necessary to prevent significant physical, psychological, or financial harm to the Person Subject to Guardianship, and there are no other means to avoid or mitigate such significant harm.

If the guardian believes a restriction is necessary, the guardian must first seek limited restrictions whenever possible, including supervised visits, phone calls, video calls, written correspondence, or limits on the length, frequency, or content of communication. Minn. Stat. § 524.5-313(c)(6).

- g. ☐ Apply on behalf of the Person Subject to Guardianship for any assistance, services, or benefits available to the Person Subject to Guardianship through any unit of government (**only given if no conservator is appointed**). Minn. Stat. § 524.5-313(c)(7).
- h. ☐ Establish an ABLE (Achieving a Better Life Experience) account for the Person Subject to Guardianship. Minn. Stat. § 524.5-313(c)(9).
- i. ☐ Start a lawsuit on behalf of and represent the person in all civil proceedings (**only given if no conservator is appointed**). Minn. Stat. § 524.5-313(c)(10).
- j. ☐ Other: _____

23. Does the Respondent appear to understand the nature and effect of voting?

- ☐ No, and the Court should determine Respondent's capacity to vote.
- ☐ Yes, and the Respondent should maintain the right to vote.

Information about the Proposed Conservator

24. Proposed **Conservator's** Name and Contact Information

Is the proposed Conservator also the Petitioner (listed in #1)? ☐ No ☐ Yes

Is the proposed Conservator also the proposed Guardian (listed in #14)? ☐ No ☐ Yes

If No to both questions, give the following information about the proposed Conservator:

Name: _____

Street Address: _____

City, State, Zip: _____

Phone: _____

Email: _____ or ☐ None

25. Who nominated this proposed **Conservator**? (Check all that apply)

- ☐ Respondent
☐ Respondent's parent
☐ Respondent's spouse
☐ Proposed Conservator (self-nominated)
☐ Other: _____

26. Was the proposed **Conservator** previously appointed as Conservator of the Respondent by a court order?

- ☐ No
☐ Yes (list the Court File Number: _____)

27. Why is the proposed **Conservator** the most suitable and best qualified among those available and willing to serve as conservator?

28. Does the proposed **Conservator** provide any of the following to the Respondent **for a fee**?

Residence:

- ☐ No ☐ Yes

Custodial Care

- ☐ No ☐ Yes

Medical Care

- ☐ No ☐ Yes

Employment Training

- ☐ No ☐ Yes

Any Other Care or Services

- ☐ No ☐ Yes

If **Yes** to any of the above, is the proposed **Conservator** related to Respondent by blood, marriage, or adoption? ☐ No ☐ Yes

Note: According to Minn. Stat. § 524.5-413(d), a person or agency that provides the services listed above to the respondent for a fee may not be appointed as conservator unless they are related to the respondent by blood, marriage, or adoption.

29. Are you asking that the Court appoint more than 1 conservator (the other proposed conservators would be called “co-conservators”)?

☐ No ☐ Yes

If Yes, fill out one *Co-Conservator Attachment* (GAC502-Co-C) for each Proposed **Co-Conservator**.

Reasons Why a Conservatorship Is Needed

Minnesota law says that, in this Petition, you must explain or describe:

- The nature and extent of Respondent’s alleged impairment (why Respondent’s ability to receive and evaluate information is impaired); and
- Why a conservatorship is in Respondent’s best interest (including giving a description of “the nature and extent” of Respondent’s incapacity).

30. Describe Respondent’s alleged impairments that affect Respondent’s ability to receive and evaluate information: _____

31. How will a conservatorship help the Respondent, and why is a conservatorship in the Respondent’s best interest?

Powers of the Conservator – Minn. Stat. § 524.5-417

The Court will grant to a conservator only those powers necessary to meet the Respondent’s demonstrated needs.

32. What powers are needed for a Conservator to protect and supervise the Respondent’s estate? Choose “**All Powers**” to Conservator or “**Limited Powers**” to Conservator.

- ☐ **All Powers to Conservator.** The Court should grant to the Conservator the power and duty to exercise all rights and powers on behalf of the Respondent under Minn. Stat. § 524.5-417(c) and Minn. Stat. § 524.5-418 subject to the procedures and Court approval set forth in that statute. **Explain why the Court should not limit the Conservator’s powers:** _____

OR

- ☐ **Limited Powers to Conservator.** The Court should grant to the Conservator the power and duty to exercise the following rights and powers under Minn. Stat. § 524.5-417(c) and Minn. Stat. § 524.5-418 subject to the procedures and Court approval set forth in statute.

Check the boxes to tell the Court which powers and duties Petitioner is asking the Court to grant to the Conservator:

- a. ☐ Pay reasonable charges for the support, maintenance, and education of the Person Subject to Conservatorship in a manner suitable to their station in life and the value of their estate, pursuant to Minn. Stat. § 524.5-417(c)(1).
- b. ☐ Pay out of the estate of the Person Subject to Conservatorship all lawful debts of the Person Subject to Conservatorship, and the reasonable charges incurred for the support, maintenance, and education of the spouse and dependent children (if any) of the Person Subject to Conservatorship, pursuant to Minn. Stat. § 524.5-417(c)(2).
- c. ☐ Possess and manage the estate of the Person Subject to Conservatorship, collect all debts and claims in favor of the Person Subject to Conservatorship, or with the approval of the court compromise them, institute suit on behalf of and represent the Person Subject to Conservatorship in all civil court proceedings; and invest all funds not currently needed for debts, charges, and management of the estate in accordance with the provisions of Minn. Stat. §§ 48A.07, subd. 6, 501C.0901, and 524.5-423, or as otherwise ordered by the court, pursuant to Minn. Stat. § 524.5-417(c)(3).
- d. ☐ Exchange or sell an undivided interest in real estate that the Respondent inherited, or purchase, on behalf of the Person Subject to Conservatorship, interest other heirs may have in the real estate, pursuant to Minn. Stat. § 524.5-417(c)(4) subject to the procedures and Court approval set forth in Minn. Stat. § 524.5-418. Sell, mortgage, or lease real estate subject to the procedures and Court approval set forth in Minn. Stat. § 524.5-418.
- e. ☐ Approve or withhold approval of any contract, except for necessities, which the Person Subject to Conservatorship may make or wish to make, pursuant to Minn. Stat. § 524.5-417(c)(5).
- f. ☐ Apply on behalf of the Person Subject to Conservatorship for any assistance, services, or benefits available to the Person Subject to Conservatorship through any unit of government, pursuant to Minn. Stat. § 524.5-417(c)(6).

g. ☐ Establish and exercise all powers over an ABLE (Achieving a Better Life Experience) account for the benefit of the Person Subject to Conservatorship, pursuant to Minn. Stat. § 524.5-417(c)(7).

h. ☐ Other: _____

Additional Information about the Proposed Guardian and Proposed Conservator



Important!

According to Minn. Stat. §§ 524.5-303(c) and 524.5-403(d), the Petition must include the information in this section about the following individuals:

- the Proposed Guardian;
- the Proposed Conservator;
- all Co-Guardians;
- all Co-Conservators; and
- any employee of the Guardian and/or Conservator who will be responsible for exercising powers and duties under the guardianship and/or conservatorship.

Note: You will need to fill out the *Co-Guardian Attachment to Petition* (GAC502-Co-G) to answer these questions about co-guardians, and the *Co-Conservator Attachment to Petition* (GAC502-Co-C) to answer these questions about co-conservators.

33. Have the proposed **Guardian** and the proposed **Conservator** ever been removed for cause from serving as a guardian or conservator?

☐ No

or

☐ Yes, (name)_____ has been removed for cause from serving as a guardian or conservator. These are the details of the case:

Location: _____

Court File Number: _____

34. How much do the proposed **Guardian** and the proposed **Conservator** anticipate charging for the performance of their guardian and conservator services?

(Name)_____ anticipates charging:

\$ _____

☐ hourly

☐ monthly

☐ flat rate

☐ other: _____

35. Is the proposed **Guardian** or the proposed **Conservator** a professional guardian or conservator?

☐ No ☐ Yes

If Yes:

a. (Name) _____ is a: **(Check all that apply)**

☐ Professional guardian

☐ Professional conservator

b. Give a summary of this person's educational background, relevant work experience, and other experience: _____

c. What is the professional's current customary rate per hour? \$ _____

36. Has the proposed **Guardian** or proposed **Conservator** applied for or held any professional licenses? ☐ No ☐ Yes

If yes, describe the professional licenses applied for or held:

Professional License 1

Name of Person: _____

Type of License: _____

Agency: _____

License Number: _____

Status (for example: active, expired, suspended, etc.): _____

Professional License 2

Name of Person: _____

Type of License: _____

Agency: _____

License Number: _____

Status (for example: active, expired, suspended, etc.): _____

Professional License 3

Name of Person: _____

Type of License: _____

Agency: _____

License Number: _____

Status (for example: active, expired, suspended, etc.): _____

If the status of any license has been **denied, conditioned, suspended, revoked, or cancelled**, explain why: _____

37. Has the proposed **Guardian** or proposed **Conservator** been found civilly liable in an action involving fraud, misrepresentation, material omission, misappropriation, theft, or conversion?

☐ No

or

☐ Yes, (name) _____ has been found civilly liable in an action involving fraud, misrepresentation, material omission, misappropriation, theft, or conversion.) These are the details of the case:

Court location: _____

Court File Number: _____

38. Has the proposed **Guardian** or proposed **Conservator** filed or received protection under the bankruptcy laws in the last 5 years?

☐ No

or

- ☐ Yes, (name) _____ has filed or has received protection under the bankruptcy laws in the last 5 years. These are the details of the case:

Court location: _____

Court File Number: _____

39. Does the proposed **Guardian** or proposed **Conservator** have any outstanding civil monetary judgments against them?

- ☐ No

or

- ☐ Yes, (name) _____ has outstanding civil monetary judgments against them. These are the details of the case:

Court location: _____

Court File Number: _____

40. Is an Order for Protection (OFP) or Harassment Restraining Order (HRO) in effect (or has one been in effect) against the proposed **Guardian** or proposed **Conservator**?

- ☐ No

or

- ☐ Yes, (name) _____, currently has, or has had, an order for protection or harassment restraining order issued against them.

Court location: _____

Court File Number: _____

41. Has the proposed **Guardian** or proposed **Conservator** been convicted of a gross misdemeanor or felony crime?

- ☐ No

or

- ☐ Yes, (name) _____ has been convicted of a gross misdemeanor or felony crime. These are the details of the case:

Name of Crime or Offense: _____

Court location: _____

Court File Number: _____

Note: Do not include petty misdemeanors or traffic offenses.

Requests

Petitioner asks the Court to schedule hearing on this petition and, after the hearing, issue an order:

Appointing (name) _____
Guardian of Respondent with the powers and duties described in statements at #22 above.

☐ Appointing (name) _____
as Co-Guardian of Respondent with the powers and duties described in the statements contained in the *Co-Guardian Attachment to Petition* (GAC502-Co-G).

Appointing (name) _____
as Conservator of Respondent with the powers and duties described in the statements at #32 above.

☐ Appointing (name) _____
as Co-Conservator of Respondent with the powers and duties described in the statements contained in the *Co-Conservator Attachment to Petition* (GAC502-Co-C).

Date: _____ Signature: _____

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____