



SAMPLE

Guardianship Petition

- Self Help Info & Free Forms: www.courts.ca.gov/selfhelp OR www.sb-court.org (Court Website)
- Email Assistance: selfhelpforms@sb-court.org

Resource Center Services & Hours:

First Come, First Served . . . Arrive early!

SAN BERNARDINO HISTORIC COURTHOUSE

New Guardianship Petitions Reviewed on Mondays ONLY

TUESDAYS to THURSDAYS 8:30am to 4:00pm*

****Assistance with other guardianship issues (no petitions)***

VICTORVILLE COURTHOUSE

New Guardianship Petitions Reviewed on Thursdays ONLY

Space is limited at both locations to the first 3 customers with completed petitions.

It may take more than an hour to review your papers, so please arrive early!

Demand for self help services may exceed staff availability on any given day.

Black Ink Only. Do NOT use white out on your forms.

Locations:

- San Bernardino Historic Courthouse, 351 N. Arrowhead, 1st Floor
- Victorville Courthouse, 14455 Civic Drive, Near V-10

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, State Bar number, and address):</i> <hr/> <p style="text-align: center;">TELEPHONE NO.: FAX NO. <i>(Optional):</i></p> <p>E-MAIL ADDRESS <i>(Optional):</i></p> <p>ATTORNEY FOR <i>(Name):</i></p>	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
TEMPORARY GUARDIANSHIP OF <i>(Name):</i>	CASE NUMBER:
MINOR	HEARING DATE:
PETITION FOR APPOINTMENT OF TEMPORARY GUARDIAN <input type="checkbox"/> Person* <input type="checkbox"/> Estate* <input type="checkbox"/> Person and Estate*	DEPT.: TIME:

1. **Petitioner** *(name each):*

requests that

- a. *(Name):*
(Address and telephone number):
be appointed temporary guardian of the PERSON of the minor and Letters issue upon qualification.
- b. *(Name):*
(Address and telephone number):
be appointed temporary guardian of the ESTATE of the minor and Letters issue upon qualification.
- c. (1) bond not be required because petition is for a temporary guardianship of the person only.
 (2) bond not be required for the reasons stated in attachment 1c.
 (3) \$ _____ bond be fixed. It will be furnished by an admitted surety insurer or as otherwise provided by law.
(Specify reasons in Attachment 1c if the amount is different from maximum required by Probate Code section 2320 and Cal. Rules of Court, rule 7.207(c).)
 (4) \$ _____ in deposits in a blocked account be allowed. Receipts will be filed.
(Specify institution and location):
- d. a request for an exception to notice of the hearing on this petition for good cause is filed with this petition.
- e. the powers specified in attachment 1e be granted in addition to the powers provided by law.
- f. other orders be granted *(specify in attachment 1f)*.

2. **The minor is** *(name):*

Current address: _____ Current telephone no.: _____

3. **The minor requires a temporary guardian** to provide for temporary care, maintenance, and support
 protect property from loss or injury because *(facts are* *specified in attachment 3* *as follows):*

***You MAY use this form or form GC-110(P) for a temporary guardianship of the person. You MUST use this form for a temporary guardianship of the estate or the person and estate.**

TEMPORARY GUARDIANSHIP OF (Name):	CASE NUMBER:
MINOR	

3. (Facts supporting appointment of a temporary guardian (continued)):

4. **Temporary guardianship is required**

- a. pending the hearing on the petition for appointment of a general guardian.
- b. pending the appeal under Probate Code section 1301.
- c. during the suspension of powers of the guardian.

5. **Character and estimated value of the property of the estate** (complete if a temporary guardianship of the estate or person and estate is requested):

- a. Personal property: \$ _____
- b. Annual gross income from all sources, including real and personal property, wages, pensions, and public benefits: \$ _____
- c. Additional amount for cost of recovery on the bond, calculated as required under Cal. Rules of Court, rule 7.207(c): \$ _____
- d. **Total:** \$ _____

6. Petitioner believes the minor will will not attend the hearing.

7. All attachments to this form are incorporated by this reference as though placed here in this form. There are _____ pages attached to this form.

Date:

 (SIGNATURE OF ATTORNEY*)

* (Signature of all petitioners also required (Prob. Code, § 1020).)

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

 (TYPE OR PRINT NAME)

 (SIGNATURE OF PETITIONER)

 (TYPE OR PRINT NAME)

 (SIGNATURE OF PETITIONER)

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): <hr/> <p style="text-align: center;">TELEPHONE NO.: _____ FAX NO. (<i>Optional</i>): _____</p> E-MAIL ADDRESS (<i>Optional</i>): _____ ATTORNEY FOR (<i>Name</i>): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
TEMPORARY GUARDIANSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (<i>Name</i>): _____	MINOR
ORDER APPOINTING TEMPORARY GUARDIAN	CASE NUMBER: _____
WARNING: THIS APPOINTMENT IS NOT EFFECTIVE UNTIL LETTERS HAVE ISSUED.	

1. The petition for appointment of a temporary guardian came on for hearing as follows (*check boxes c-l to indicate personal presence*):

- a. Judicial officer (*name*): _____
- b. Hearing date: _____ Time: _____ Dept.: Room:
- c. Petitioner (*name*): _____
- d. Attorney for petitioner (*name*): _____
- e. Minor (*name*): _____
- f. Attorney for minor (*name*): _____
- g. Minor's parents (*names*): _____
- h. Attorney for minor's parents (*names*): _____
- i. Person with valid visitation order (*name*): _____
- j. Attorney for person with valid visitation order (*name*): _____
- k. Public Guardian (*name*): _____
- l. Attorney for Public Guardian (*name*): _____

THE COURT FINDS

- 2. a. Notice of the time and place of hearing has been given as required by law.
- b. Notice of the time and place of hearing has been should be dispensed with for (*names*): _____

- 3. It is necessary that a temporary guardian be appointed to provide for temporary care, maintenance, and support
 protect property from loss or injury pending the hearing on the petition for appointment of a general guardian.
 pending an appeal under Probate Code section 1301. during the suspension of powers of the guardian.

THE COURT ORDERS

- 4. a. (*Name*): _____
 (*Address*): _____ (*Telephone*): _____

 is appointed temporary guardian of the PERSON of (*name*): _____
 and Letters shall issue upon qualification.
- b. (*Name*): _____
 (*Address*): _____ (*Telephone*): _____

 is appointed temporary guardian of the ESTATE of (*name*): _____
 and Letters shall issue upon qualification.

TEMPORARY GUARDIANSHIP OF <i>(Name):</i>	CASE NUMBER:
MINOR	

5. Notice of hearing to the persons named in item 2b is dispensed with.
6. a. Bond is not required.
- b. Bond is fixed at: \$ _____ to be furnished by an authorized surety company or as otherwise provided by law.
- c. Deposits of: \$ _____ are ordered to be placed in a blocked account at *(specify institution and location)*:
- _____ and receipts shall be filed. No withdrawals shall be made without a court order. Additional orders in attachment 6c.
- d. The temporary guardian is not authorized to take possession of money or any other property without a specific court order.
7. In addition to the powers granted by law, the temporary guardian is granted other powers. These powers are specified in attachment 7. below *(specify)*:

8. Other orders as specified in attachment 8 are granted.
9. Unless modified by further order of the court, this order expires on *(date)*:
10. Number of boxes checked in items 4–9: _____
11. Number of pages attached: _____

Date:

 JUDICIAL OFFICER

SIGNATURE FOLLOWS LAST ATTACHMENT

ATTORNEY OR PARTY WITHOUT ATTORNEY (name, address, and State Bar number):
After recording, return to:

TEL NO.: FAX NO. (optional):
E-MAIL ADDRESS (optional):
ATTORNEY FOR (name):

SUPERIOR COURT OF CALIFORNIA, COUNTY OF
STREET ADDRESS:
MAILING ADDRESS:
CITY AND ZIP CODE:
BRANCH NAME:

FOR RECORDER'S USE ONLY

TEMPORARY GUARDIANSHIP CONSERVATORSHIP
OF (name): MINOR CONSERVATEE

CASE NUMBER:

LETTERS OF TEMPORARY GUARDIANSHIP CONSERVATORSHIP
 Person Estate

FOR COURT USE ONLY

LETTERS

1. (Name):
is appointed temporary guardian conservator of the person
 estate of (name):

2. Other powers that have been granted or restrictions imposed on the temporary
 guardian conservator are specified in Attachment 2.
 specified below:

3. These Letters shall expire
a. on (date): or upon earlier issuance of Letters to a general guardian or conservator.
b. on other date (specify):

4. The temporary guardian conservator is not authorized to take possession of money or any other property without a specific court order.

5. Number of pages attached:

WITNESS, clerk of the court, with seal of the court affixed.

(SEAL)

Date:
Clerk, by _____, Deputy

This form may be recorded as notice of the establishment of a temporary conservatorship of the estate as provided in Probate Code section 1875.

TEMPORARY <input type="checkbox"/> GUARDIANSHIP <input type="checkbox"/> CONSERVATORSHIP OF (name): <div style="text-align: center;"> <input type="checkbox"/> MINOR <input type="checkbox"/> CONSERVATEE </div>	CASE NUMBER:
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NOTICE TO INSTITUTIONS AND FINANCIAL INSTITUTIONS
(Probate Code sections 2890–2893)

When these *Letters of Temporary Guardianship* or *Letters of Temporary Conservatorship* (Letters) are delivered to you as an employee or other representative of an *institution* or *financial institution* (described below) in order for the temporary guardian or temporary conservator of the estate (1) to take possession or control of an asset of the minor or conservatee named above held by your institution (including changing title, withdrawing all or any portion of the asset, or transferring all or any portion of the asset) or (2) to open or change the name of an account or a safe-deposit box in your financial institution to reflect the guardianship or conservatorship, you must fill out Judicial Council form GC-050 (for an institution) or form GC-051 (for a financial institution). An officer authorized by your institution or financial institution must date and sign the form, and you must file the completed form with the court.

There is no filing fee for filing the form. You may either arrange for personal delivery of the form or mail it to the court for filing at the address given for the court on page 1 of these Letters.

The temporary guardian or temporary conservator should deliver a blank copy of the appropriate form to you with these Letters, but it is your institution's or financial institution's responsibility to complete the correct form, have an authorized officer sign it, and file the completed form with the court. If the correct form is not delivered with these Letters or is unavailable for any other reason, blank copies of the forms may be obtained from the court. The forms may also be accessed from the judicial branch's public Web site free of charge. The Internet address (URL) is www.courts.ca.gov/forms/. Select the form group *Probate—Guardianships and Conservatorships* and scroll down to form GC-050 for an institution or form GC-051 for a financial institution. The forms may be printed out as blank forms and filled in by typewriter, or may be filled out online and printed out ready for signature and filing.

An *institution* under California Probate Code section 2890(c) is an insurance company, insurance broker, insurance agent, investment company, investment bank, securities broker-dealer, investment advisor, financial planner, financial advisor, or any other person who takes, holds, or controls an asset subject to a conservatorship or guardianship other than a financial institution. Institutions must file a *Notice of Taking Possession or Control of an Asset of Minor or Conservatee* (form GC-050) for an asset of the minor or conservatee held by the institution. A single form may be filed for all affected assets held by the institution.

A *financial institution* under California Probate Code section 2892(b) is a bank, trust (including a Totten trust account but excluding other trust arrangements described in Probate Code section 82(b)), savings and loan association, savings bank, industrial bank, or credit union. Financial institutions must file a *Notice of Opening or Changing a Guardianship or Conservatorship Account or Safe-Deposit Box* (form GC-051) for an account or a safe deposit box held by the financial institution. A single form may be filed for all affected accounts or safe deposit boxes held by the financial institution.

LETTERS OF TEMPORARY GUARDIANSHIP CONSERVATORSHIP
AFFIRMATION

I solemnly affirm that I will perform according to law the duties of temporary guardian. conservator.

Executed on (date): _____, at (place): _____

_____ (TYPE OR PRINT NAME)		_____ (SIGNATURE OF APPOINTEE)
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CERTIFICATION

I certify that this document, including any attachments, is a correct copy of the original on file in my office and that the Letters issued to the person appointed above have not been revoked, annulled, or set aside and are still in full force and effect.

(SEAL)

Date: _____

Clerk, by _____, Deputy

Is opposition expected from the other party? Yes No Unknown

For All Cases Except Domestic Violence Restraining Order

- I have served the other party with a copy of the paperwork.
- I have not yet had a reasonable opportunity to serve the other party with the paperwork.

- My notice to the other party was later than 10:00am on the court day before the hearing. See the attached declaration explaining the exceptional circumstances about why there was shorter notice.

▶ALL CASES: You may ask the court to excuse you from giving notice to the other party for good cause.

If you did not give notice to the other party, you must write down your explanation here. Below you will find a list of reasons from California Rules of Court Rule 5.165 why no notice may be acceptable.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: _____

Signed by: _____

Street Address: _____

City/State/Zip: _____

California Rules of Court, Rule 5.165

- The party made reasonable and good faith efforts to give notice to the other party, and further efforts to give notice would probably be futile or unduly burdensome;
- Giving notice would frustrate the purpose of the order;
- Giving notice would result in immediate and irreparable harm to the applicant or the children who may be affected by the order sought;
- Giving notice would result in immediate and irreparable damage to or loss of property subject to disposition in the case; or
- The parties agreed in advance that notice will not be necessary with respect to the matter that is the subject of the request for emergency orders.

***See Rules of Court, Rule 5.165 for notice requirements -- no later than 10:00 am on the court day before the matter is to be considered by the court or provide written explanation of exceptional circumstances.
SB-19447 Revised 3.11.13***

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NO.: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
GUARDIANSHIP OF (name):	CASE NUMBER:
PETITION FOR APPOINTMENT OF GUARDIAN OF <input type="checkbox"/> MINOR* <input type="checkbox"/> MINORS* <input type="checkbox"/> Person** <input type="checkbox"/> Estate**	HEARING DATE AND TIME: DEPT.:

1. **Petitioner** (name each):

requests that

- a. (name):
 (address):
 (telephone):
 be appointed guardian of the PERSON of the minor or minors named in item 2 and *Letters* issue upon qualification.
- b. (Not applicable to proposed wards 18 years of age and older.)
 (name):
 (address):
 (telephone):
 be appointed guardian of the ESTATE of the minor or minors named in item 2 and *Letters* issue upon qualification.
- c. (1) bond not be required because the petition is for guardian of the person only because the proposed guardian is a corporate fiduciary or an exempt government agency for the reasons stated in Attachment 1c.
 (2) \$ bond be fixed. It will be furnished by an authorized surety company or as otherwise provided by law. (Specify reasons in Attachment 1c if the amount is different from the minimum required by Prob. Code, § 8482.)
 (3) \$ in deposits in a blocked account be allowed. Receipts will be filed. (Specify institution and location):
- d. authorization be granted under Probate Code section 2590 to exercise the powers specified in Attachment 9.
- e. orders relating to the powers and duties of the proposed guardian of the person under Probate Code sections 2351–2358 be granted (specify orders, facts, and reasons in Attachment 1e).
- f. an order dispensing with notice to the persons named in Attachment 10 be granted.
- g. other orders be granted (specify in Attachment 1g).

2. Attached is a copy of *Guardianship Petition—Child Information Attachment* (form GC-210(CA)) for each minor for whom this petition requests the appointment of a guardian. The full legal name and date of birth of each minor is:

- a. Name: _____ Date of Birth (month/day/year): _____
- b. Name: _____ Date of Birth (month/day/year): _____
- c. Name: _____ Date of Birth (month/day/year): _____
- d. Name: _____ Date of Birth (month/day/year): _____

The names and dates of birth of additional minors are specified on Attachment 2 to this petition.

*Under section 1510.1(d) of the Probate Code, the terms *child*, *minor*, and *ward* include a youth 18 to 20 years of age.
 **You MAY use this form or form GC-210(P) for a guardianship of the person. You MUST use this form for a guardianship of the estate or of the person and estate. Do NOT use this form for a temporary guardianship.

GUARDIANSHIP OF <i>(name)</i> :	CASE NUMBER:
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3. Petitioner is
 - a. related to the minor or minors named in item 2, as shown in item 7 of each minor's attached form GC-210(CA).
 - b. the minor named in item 2, who is 12 years of age or older.
 - c. another person on behalf of minor or minors named in item 2, as shown in item 7 of each minor's attached form GC-210(CA).

4. The proposed guardian is *(check all that apply)*:
 - a. a nominee *(affix a copy of nomination as Attachment 4a or file Nomination of Guardian (form GC-211, items 2 and 3) with this petition.*
 - b. related to the minor or minors named in item 2, as shown in item 3 of each minor's attached form GC-210(CA).
 - c. other, as shown in item 3 of each minor's attached form GC-210(CA).
 - d. a professional fiduciary within the meaning of the Professional Fiduciaries Act. The proposed guardian's license status is shown in item 1 on page 1 of the attached Professional Fiduciary Attachment. *(Use form GC-210(A-PF)/GC-310(A-PF) for this attachment.)*

5. Petitioner, with intent to adopt, has accepted or intends to accept physical care or custody of the minor.

6. A person other than the proposed guardian has been nominated as the guardian of the minor by will other writing. A copy of the nomination is affixed as Attachment 6. *(Specify name and address of nominee in item 2 of minor's attached form GC-210(CA).)*

7. Character and estimated value of property of the estate *(complete if petition requests appointment of a guardian of the estate or the person and estate)*:

a. Personal property:	\$
b. Annual gross income from all sources, including real and personal property, wages, pensions, and public benefits:	\$
c. Total:	\$ _____
d. Real property: \$	

8. Appointment of a guardian of the person estate of the minor or minors named in item 2 is necessary or convenient for the following reasons:

Continued in Attachment 8. Parental custody would be detrimental to the minor or minors named in item 2 *(not applicable to proposed wards 18 years of age and older).*

9. Granting the proposed guardian of the estate powers to be exercised independently under Probate Code section 2590 would be to the advantage and benefit and in the best interest of the guardianship estate. Reasons for this request and the powers requested are specified in Attachment 9.

10. Notice to the persons named in Attachment 10 should be dispensed with under Probate Code section 1511 because
 - they cannot with reasonable diligence be given notice *(specify names and efforts to locate in Attachment 10).*
 - giving notice to them would be contrary to the interest of justice *(specify names and reasons in Attachment 10).*

GUARDIANSHIP OF <i>(name)</i> :	CASE NUMBER:
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11. (Complete this item if this petition is filed by a person who is not related to a minor named in item 2 and is not a petition for appointment of a guardian of the estate only.)
- a. Petitioner is the proposed guardian and will promptly furnish all information requested by any agency referred to in Probate Code section 1543.
 - b. Petitioner is not the proposed guardian. A statement by the proposed guardian that he or she will promptly furnish all information requested by any agency referred to in Probate Code section 1543 is affixed as Attachment 11b.
 - c. The proposed guardian's home is is not a licensed foster family home.
 - d. The proposed guardian has never filed a petition for adoption of the minor except as specified in Attachment 11d.

12. Attached to this petition is a *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)* (form GC-120) concerning each child under 18 years of age listed in item 2 (*guardianship of the person or person and estate only*).

13. Filed with this petition are the following (*check all that apply*):
- Consent of Proposed Guardian* (form GC-211, item 1)
 - Nomination of Guardian* (form GC-211, items 2 and 3)
 - Consent to Appointment of Guardian and Waiver of Notice* (form GC-211, item 4)
 - Petition for Appointment of Temporary Guardian* (form GC-110)
 - Petition for Appointment of Temporary Guardian of the Person* (form GC-110(P))
 - Confidential Guardianship Screening Form* (form GC-212)
 - Petition for Special Immigrant Juvenile Findings* (form GC-220)

Other (*specify*):

14. All attachments to this form are incorporated by this reference as though placed here in this form. Number of pages attached:

Date: _____
(SIGNATURE OF ATTORNEY*)

***(All petitioners and the proposed ward—if he or she is at least 18 years of age but not yet 21 and not a petitioner—must also sign.)**

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: _____

(TYPE OR PRINT NAME)	▶	(SIGNATURE OF PETITIONER)
(TYPE OR PRINT NAME)	▶	(SIGNATURE OF PETITIONER)
(TYPE OR PRINT NAME)	▶	(SIGNATURE OF PETITIONER)

I consent to the appointment of the person named in item 1.a as guardian of my person and to his or her performance of the duties of a guardian on my behalf.

Date: _____

(TYPE OR PRINT NAME)	▶	(SIGNATURE OF PROPOSED WARD)
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Guardianship of (*all children's names*): _____

This child's name: _____

Fill out a separate copy of this form for **each** child for whom you want the court to appoint a guardian.**This form is attached to the Petition, item 2 of form GC-210, or item 8 of form GC-210(P).**The Petition asks for the appointment of a guardian of this child's (*specify*): person estate person and estate**1 Tell the court about this child**a. Child's full legal name: _____ Date of birth: _____
First *Middle* *Last* *Month/Day/Year*b. Child's current address: _____

_____c. (*If the Petition to which this form is attached asks for the appointment of a guardian of this child's estate only, skip this item 1c, select item 8 a on page 5, and answer the rest of the items in this form. If the Petition asks for the appointment of a guardian of this child's person or this child's person and estate, complete the steps described here. Ask the child, if he or she is old enough, and the child's parents or any other legal guardian, and any Indian custodian, whether the child is or may be an Indian (Native American) child. You may not rely merely on your own knowledge and belief about the child. If possible, ask these persons before you file your petition, including this form, so you can use the information you receive to answer questions (1) and (2) below. Answer those questions, item 8 on page 5, and the rest of the items in this form.*)**(For more information about your duties concerning a child who is or may be an Indian child involved in a guardianship of the person under the Indian Child Welfare Act ("ICWA") (25 U.S.C. § 1901 et seq.) and California law, including making the inquiry described above and completing this form, see the Information Sheet on Indian Child Inquiry Attachments and Notice of Child Custody Proceeding For Indian Child (form ICWA-005-INFO).)**(1) Is this child a member of, or eligible for membership in, one or more Indian tribes recognized by the federal government? No Not sure Yes (*specify tribe or tribes*): _____

_____*(If you checked "Yes" to item (1), this guardianship case is subject to ICWA. If you checked "Not sure" or "No" to item (1), answer item (2).)*(2) Do you know or have reason to know (within the meaning of Prob. Code, §§ 1460.2(a), Welf. & Inst. Code, § 224.3(b), and Cal. Rules of Court, rule 7.1015), whether this child is or may be an Indian child?
 No Yes (*If you checked "Yes" to either item (1) or (2), you must file and serve a Notice of Child Custody Proceeding for Indian Child (form ICWA-030), in addition to service of any other notices required in this case. For information about what is "reason to know whether the child is or may be an Indian child" and the notice requirement, including who must be served, how to serve them, and how to prove to the court that you have done so, and how to fill out and file the Notice, see the Information Sheet on Indian Child Inquiry Attachments and Notice of Child Custody Proceeding For Indian Child (form ICWA-005-INFO).*)d. Is this child married? Yes No Never married If you checked "No," was this child formerly married but the marriage was dissolved or ended in divorce? Yes No
(The court cannot appoint a guardian of the person for a minor child who is married or whose marriage was dissolved or ended in divorce.)

Guardianship of (all children's names): _____

Case Number: _____

This child's name: _____

1 Tell the court about this child (continued)

e. Is this child receiving public assistance? Yes No Unknown (If you checked "Yes," fill out below.)

Type of Aid	Monthly Benefit	Type of Aid	Monthly Benefit
<input type="checkbox"/> TANF (Temporary Asst. for Needy Families)	\$ _____	<input type="checkbox"/> Other (explain):	\$ _____
<input type="checkbox"/> Social Security	\$ _____	<input type="checkbox"/> Other (explain):	\$ _____
<input type="checkbox"/> Dept. Veterans Affairs Benefits	\$ _____		

f. Name and address of the person with legal custody of this child: _____

g. (Check this box and fill out below if the person the child lives with is not the person with legal custody.)

Name and address of the person this child lives with (has the care of the child): _____

h. (Check this box if this child has been involved in an adoption, juvenile court, marriage dissolution (divorce), domestic relations, custody, or other similar court case.) Describe the court case below:

Type of Case	Court District or County and State	Case Number (if known)

i. (Check this box if this child is in or on leave from an institution supervised by the California Department of Developmental Services or the California Department of Mental Health.) Write the name of the institution here: _____

2 List the names and addresses of this child's relatives and other persons shown below:

Relationship	Name	Home Address (Street, City, State, Zip)
Father	_____	_____
Mother	_____	_____
Grandfather (Father's father)	_____	_____
Grandmother (Father's mother)	_____	_____
Grandfather (Mother's father)	_____	_____
Grandmother (Mother's mother)	_____	_____



Guardianship of (all children's names): _____

Case Number: _____

This child's name: _____

2 Names and addresses of this child's relatives and other persons (continued):

Relationship	Name	Home Address (Street, City, State, Zip)
Brother/Sister	_____	_____

(Check here if this child has additional brothers or sisters, including half-brothers and half-sisters, and list their names and addresses on a separate sheet of paper. Write "Form GC-210(CA)," the name of this child, and "Item 2:—Other Siblings" at the top of the paper and attach it to this form.)

Spouse
(Guardianship of the estate only) _____

Person nominated as guardian of this child
(Other than a proposed guardian listed in 3) _____

3 Information about the proposed guardian:

a. Name (name all proposed guardians if more than one): _____

b. Relationship(s) to the child named in 1 (check all that apply):

Relative (specify relationships of all proposed guardians to the child): _____

Not a relative (explain interest in or connection to this child): _____



Guardianship of (all children's names): _____

Case Number: _____

This child's name: _____

- 8 An Indian child inquiry concerning the child named above:
- a. is not required; this is a guardianship of the estate only. (If you check this box, skip the rest of item 8.)
 - b. has not been made or completed for the following reasons (check all that apply):
 - (1) Petitioner knows the child is an Indian child and has identified the child's tribe or tribes in item 1.
 - (2) Petitioner (or the proposed guardian if he or she is not the petitioner) is the child's Indian custodian.
 - (3) Petitioner has been unable to communicate with the child's parents, other legal guardian, or Indian custodian for the following reasons and despite the following efforts to do so (describe):

 - (Check here if you need more space. Continue your explanation on a separate sheet of paper. Write "Form GC-210(CA)," the name of this child, and "Attachment 8b(3)—Indian Child Inquiry" at the top of the paper and attach it to this form.)
 - c. has been made and the following information was obtained (check all that apply):
 - (1) The names, relationships to the child named above, addresses, and telephone numbers, of the persons interviewed by Petitioner to collect or confirm the information given below, and the date or dates the interviews took place, are provided on one or more separate sheets of paper attached to this form.
(Write "Form GC-210(CA)," the name of this child, and "Attachment 8c(1)—Indian Child Inquiry" at the top of each page of paper you attach to this form to complete this item.)
 - (2) The child is or may be a member of or eligible for membership in a tribe.
Tribe or tribes: _____
Band (if applicable): _____
 - (3) The child's parents, grandparents, or great-grandparents are or were members of a tribe or tribes.
Tribe or tribes: _____
Band (if applicable): _____
 - (4) The residence or domicile of the child, the child's parents, or the child's Indian custodian is in a predominantly Indian community.
 - (5) The child or the child's family has received services or benefits from a tribe or services that are available to Indians from tribes or the federal government, such as the Indian Health Service or Tribal Temporary Assistance to Needy Families (TANF).
 - (6) The child may have Indian ancestry.
 - (7) Other reason or reasons to know the child is or may be an Indian child: _____

 - (8) The child has no known Indian ancestry.

9 Except as otherwise stated in this form, the statements made in the Petition to which this form is attached fully apply to this child.

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): <hr/> <p style="text-align: center;">TELEPHONE NO.: _____ FAX NO. (<i>Optional</i>): _____</p> <p style="text-align: center;">E-MAIL ADDRESS (<i>Optional</i>): _____</p> <p style="text-align: center;">ATTORNEY FOR (<i>Name</i>): _____</p>	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
GUARDIANSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (<i>Name</i>):	
<input type="checkbox"/> CONSENT OF PROPOSED GUARDIAN <input type="checkbox"/> NOMINATION OF GUARDIAN <input type="checkbox"/> CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE	CASE NUMBER:

CONSENT OF PROPOSED GUARDIAN

1. I consent to serve as guardian of the person estate of the minor.

Date:

_____ ▶ _____

(TYPE OR PRINT NAME) (SIGNATURE OF PROPOSED GUARDIAN)

NOMINATION OF GUARDIAN

2. I am a parent of the minor a donor of a gift to the minor. I nominate (*name and address*):

as guardian of the person estate of the minor.

3. I am a parent of the minor a donor of a gift to the minor. I nominate (*name and address*):

as guardian of the person estate of the minor.

Date:

_____ ▶ _____

(TYPE OR PRINT NAME) (SIGNATURE)

NOTICE: The guardian of the person of a minor child has full legal and physical custody until the child becomes an adult or is adopted, the court changes guardians, or the court terminates the guardianship. Parents or other interested persons must petition the court to terminate the guardianship. The court will not do so unless the judge decides that termination would be in the child's best interest.

CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE

4. I consent to appointment of the guardian as requested in the *Petition for Appointment of Guardian of Minor*, filed on (*date*): . I am entitled to notice in this proceeding, but I waive notice of hearing of the petition, including notice of any request for independent powers contained in it. I waive timely receipt of a copy of the petition.

DATE	(TYPE OR PRINT NAME)	▶	(SIGNATURE)	RELATIONSHIP TO MINOR
DATE	(TYPE OR PRINT NAME)	▶	(SIGNATURE)	RELATIONSHIP TO MINOR
DATE	(TYPE OR PRINT NAME)	▶	(SIGNATURE)	RELATIONSHIP TO MINOR

Continued on Attachment 4.

CONFIDENTIAL

GC-212

GUARDIANSHIP OF (Name): <div style="text-align: right;">MINOR</div>	CASE NUMBER:
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10. Have you, or has any other person living in your home, been charged with, arrested for, or convicted of a crime involving illegal substances or alcohol?
 Yes No *(If you checked "Yes," explain in Attachment 10.)*
11. Do you or does any other person living in your home suffer from mental illness?
 Yes No *(If you checked "Yes," explain in Attachment 11.)*
12. Do you suffer from any physical disability that would impair your ability to perform the duties of guardian?
 Yes No *(If you checked "Yes," explain in Attachment 12.)*
13. I have or may have I do not have an adverse interest that the court may consider to be a risk to, or to have an effect on, my ability to faithfully perform the duties of guardian.
(If you checked "I have or may have," explain in Attachment 13.)
14. I have I have not previously been appointed guardian, conservator, executor, or fiduciary in another proceeding.
(If you checked "I have," explain in Attachment 14.)
15. I have I have not been removed as guardian, conservator, executor, or fiduciary in any other proceeding.
(If you checked "I have," explain in Attachment 15.)
16. I am I am not a private professional fiduciary, as defined in Business and Professions Code section 6501(f).
(If you checked "I am," respond to item 17. If you checked "I am not," go to item 18.)
17. I am I am not currently licensed by the Professional Fiduciaries Bureau of the Department of Consumer Affairs. My license status and information is stated in item 1 on page 1 of the Professional Fiduciary Attachment signed by me and attached to the petition that proposes my appointment as guardian in this matter. *(Complete and sign the Professional Fiduciary Attachment and attach it to the petition, or deliver it to the petitioner for attachment, before the petition is filed. See item 4d of the petition. Use form GC-210(A-PF)/GC-310(A-PF) for this attachment.)*
18. I am I am not a responsible corporate officer authorized to act for *(name of corporation):*

a California nonprofit charitable corporation that meets the requirements for appointment as guardian of the proposed ward under Probate Code section 2104. I certify that the corporation's articles of incorporation specifically authorize it to accept appointments as guardian. *(If you checked "I am," explain the circumstances of the corporation's care of, counseling of, or financial assistance to the proposed ward in Attachment 18.)*
19. I have I have not filed for bankruptcy protection within the last 10 years.
(If you checked "I have," explain in Attachment 19.)

MINORS' CONTACT INFORMATION		
20. Minor's name:	School (name):	
Home telephone:	School telephone:	Other telephone:
21. Minor's name:	School (name):	
Home telephone:	School telephone:	Other telephone:
22. Minor's name:	School (name):	
Home telephone:	School telephone:	Other telephone:
<input type="checkbox"/> Information on additional minors is attached.		

DECLARATION

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(TYPE OR PRINT NAME OF PROPOSED GUARDIAN)



(SIGNATURE OF PROPOSED GUARDIAN)*

* Each proposed guardian must fill out and file a separate screening form.

Relative (relationship) _____

Non-Relative

PROPOSED GUARDIAN INFORMATION

Proposed Guardian:

Last		First	Middle	Maiden Name
Phone numbers	Home:	Work:		Cell:
Address:		City:		Zip:
Place of Birth:			Date of Birth:	
Social Security Number:			Driver's License Number:	
Race or Ethnicity:				
Will you or anyone else in the home require an interpreter? <input type="checkbox"/> Yes <input type="checkbox"/> No Language:				

DESCRIBE YOUR HOME

Single Family Home Apartment How long at present address?
 Rent Own Monthly mortgage payment or rent? \$
No. of bedrooms: Will the minor(s) have their own room? Yes No
If shared, with whom? Name: Age:
Do you have any guns or other weapons stored on the property? Yes No
If yes, what type of weapon(s)?
Where and how are they stored?
Who cares for the minor(s) if adults are employed outside of the home?

OTHER CHILDREN LIVING IN YOUR HOME UNDER THE AGE OF 18 (ATTACH ADDITIONAL PAGE IF NECESSARY)

Name	Relationship to you	Date of Birth	Place of Birth	Grade Level	Developmental Disabilities

OTHER ADULTS LIVING IN YOUR HOME OVER THE AGE OF 18 (INCLUDING YOUR SPOUSE)

Name	Driver's License	Social Security Number	Date of Birth	Relationship to you	Child Protective Services History (Yes/No)	Criminal History (Yes/No)

Does any adult in the home have any problem(s) that could affect the minor(s), such as a history of child abuse/molestation, violent behavior, or an alcohol or drug problem? Yes No
If yes, explain:

Have the police ever been to your home? Yes No
 If yes, explain when and why (attach additional page if necessary):

EMPLOYMENT / INCOME

Are you employed? Yes No

Name of Employer: Telephone Number:

Address of Employer:

Length of Employment:

Job Title:

Last Grade Completed and Special Training:

Gross Monthly Income:

Income from other sources (retirement, SSI, etc.):

YOUR HEALTH CONDITION (List any prior and/or current physical or mental health problems)

Present health status: Good Fair Poor

If Fair or Poor, please explain:

Have you ever been treated for or do you now have a physical impairment (e.g. hearing loss)? Yes No

If yes, explain in detail, including medications, hospitalizations, and therapy/counseling (when and where):

What, if any medications are you currently taking and what are they are for?

Do you have a history of mental health issues/impairments? Yes No If yes, explain:

Have you ever been in counseling? Yes No If yes, when?

If yes, what was/is the reason? Drugs Alcohol Grief Domestic Violence Other

Explain:

CRIMINAL BACKGROUND

Were you ever arrested for an offense other than a minor traffic violation? Yes No

If yes, give date, place and details of offense (attach additional page if necessary):

Have you had previous involvement with Child Protective Services? Yes No

If yes, explain the circumstances in detail and include dates and name of County or State where involvement occurred (attach an additional page if necessary):

Are you currently on Probation? Yes No Officer's Name:

If yes, explain:

Are you currently on Parole? Yes No Officer's Name:

If yes, explain:

MARRIAGESIndicate if you are: Married Widowed Single Separated Divorced Registered Domestic Partner

If currently married or separated, what is your spouse's name?

Date of most recent marriage:

Number of children from this marriage:

Ages of children:

Previous marriages:

Name of former spouses:

How were previous marriages terminated (i.e., divorce or death)?

Number of children from previous marriages:

Ages of children:

SPOUSE INFORMATION (Complete only if spouse is *not* a proposed guardian and is, therefore, not required to complete a separate questionnaire)

Full name:

Maiden name (if applicable):

Aliases:

Language(s) spoken (including sign language):

Race/Ethnicity:

Age:

Date of Birth:

Place of Birth:

Social Security Number:

Driver's License Number:

Telephone Number (TDD):

Mobile Phone Number:

Employer Name:

Employer Phone Number:

Employer Address:

Job Title:

Present health status: Good Fair PoorDoes your spouse take any medication? Yes NoDoes your spouse have any special health problems? Yes NoDoes your spouse have any mental/emotional problems? Yes NoHas your spouse ever used drugs or alcohol? Yes NoHave charges ever been filed against your spouse for crimes other than minor traffic citations? Yes NoIs your spouse on parole or probation? Yes No

If yes, parole or probation officer's name:

Phone Number:

Has your spouse had previous involvement with Child Protective Services? Yes No**INFORMATION ABOUT THE MINOR(S) NEEDING GUARDIANSHIP** (ATTACH ADDITIONAL PAGE IF NECESSARY)**Minor 1**

Name:

Age:

Ethnicity:

Date of Birth:

Place of Birth:

Date placed with petitioner:

Relationship to Petitioner:

Name of school:

Telephone:

Grade Level:

Teacher's Name:

Name of physician caring for minor:

Telephone:

Address of Physician:

Describe known medical needs, mental health needs, and/or other special needs:

How do you plan to meet the minor's medical, mental health, and/or special needs?
Does the minor have a social worker? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, who is the social worker? _____ Telephone Number: _____
Is there a custody or visitation order for the minor? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Know
Date of the order: _____ Case Number: _____
Where did the proceeding take place? County: _____ State: _____
Minor 2 <input type="checkbox"/> Not applicable
Name: _____ Age: _____ Ethnicity: _____
Date of Birth: _____ Place of Birth: _____
Date placed with petitioner: _____ Relationship to Petitioner _____
Name of school: _____ Telephone: _____
Grade Level: _____ Teacher's Name: _____
Name of physician caring for minor: _____ Telephone: _____
Address of Physician: _____
Describe known medical needs, mental health needs, and/or other special needs:
How do you plan to meet the minor's medical, mental health, and/or special needs?
Does the minor have a social worker? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, who is the social worker? _____ Telephone Number: _____
Is there a custody or visitation order for the minor? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Know
Date of the order: _____ Case Number: _____
Where did the proceeding take place? County: _____ State: _____
Minor 3 <input type="checkbox"/> Not applicable
Name: _____ Age: _____ Ethnicity: _____
Date of Birth: _____ Place of Birth: _____
Date placed with petitioner: _____ Relationship to Petitioner _____
Name of school: _____ Telephone: _____
Grade Level: _____ Teacher's Name: _____
Name of physician caring for minor: _____ Telephone: _____
Address of Physician: _____
Describe known medical needs, mental health needs, and/or other special needs:
How do you plan to meet the minor's medical, mental health, and/or special needs?
Does the minor have a social worker? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, who is the social worker? _____ Telephone Number: _____
Is there a custody or visitation order for the minor? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Know
Date of the order: _____ Case Number: _____
Where did the proceeding take place? (County) _____ (State) _____

Minor 4 <input type="checkbox"/> Not applicable		
Name:	Age:	Ethnicity:
Date of Birth:	Place of Birth:	
Date placed with petitioner:	Relationship to Petitioner	
Name of school:		Telephone:
Grade Level:	Teacher's Name:	
Name of physician caring for minor:		Telephone:
Address of Physician:		
Describe known medical needs, mental health needs, and/or other special needs:		
How do you plan to meet the minor's medical, mental health, and/or special needs?		
Does the minor have a social worker? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, who is the social worker?		Telephone Number:
Is there a custody or visitation order for the minor? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Know		
Date of the order:	Case Number:	
Where did the proceeding take place? County:		State:

Minor 5 <input type="checkbox"/> Not applicable		
Name:	Age:	Ethnicity:
Date of Birth:	Place of Birth:	
Date placed with petitioner:	Relationship to Petitioner	
Name of school:		Telephone:
Grade Level:	Teacher's Name:	
Name of physician caring for minor:		Telephone:
Address of Physician:		
Describe known medical needs, mental health needs, and/or other special needs:		
How do you plan to meet the minor's medical, mental health, and/or special needs?		
Does the minor have a social worker? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, who is the social worker?		Telephone Number:
Is there a custody or visitation order for the minor? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Know		
Date of the order:	Case Number:	
Where did the proceeding take place? County:		State:

REFERENCES			
Provide (2) non-related references who have knowledge of your home life and standing in the community.			
NAME	ADDRESS	TELEPHONE NUMBER	OCCUPATION

BIRTH PARENTS

Mother's Name:	Date of Birth:	Telephone:
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Address:		
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Last contact with minor(s):		
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Father's Name:	Date of Birth:	Telephone:
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Address:		
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Last contact with minor(s):		
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What is the relationship between Petitioner and birth parents? (visitation schedule, areas of conflict or disagreement)?		
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How long do you expect this guardianship to last?		
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What are the long term plans for the minor(s)?		
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Is the birth mother in agreement with guardianship?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unknown
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Comments:			
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Is the birth father in agreement with guardianship?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unknown
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Comments:			
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Have the birth parents made you aware of their plans for the minor(s)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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If yes, describe known plans:		
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I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct

Date:

 TYPE OR PRINT NAME OF PROPOSED GUARDIAN OR APPLICANT



 SIGNATURE OF PROPOSED GUARDIAN OR APPLICANT

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address): <hr/> TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF _____ STREET ADDRESS: _____ MAILING ADDRESS: _____ CITY AND ZIP CODE: _____ BRANCH NAME: _____	
GUARDIANSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (Name): _____ MINOR	
DUTIES OF GUARDIAN and Acknowledgment of Receipt	CASE NUMBER: _____

DUTIES OF GUARDIAN

When you are appointed by the court as a guardian of a minor, you become an officer of the court and assume certain duties and obligations. An attorney is best qualified to advise you about these matters. You should clearly understand the information on this form. You will find additional information in the *Guardianship Pamphlet (for Guardianships of Children in the Probate Court)* (Form GC-205), which is available from the court.

1. GUARDIANSHIP OF THE PERSON

If the probate court appoints you as a *guardian of the person* for a child, you will be required to assume important duties and obligations.

- a. **Fundamental responsibilities** - The guardian of the person of a child has the care, custody, and control of the child. As guardian, you are responsible for providing for food, clothing, shelter, education, and all the medical and dental needs of the child. You must provide for the safety, protection, and physical and emotional growth of the child.

- b. **Custody** - As guardian of the person of the child, you have full legal and physical custody of the child and are responsible for **all** decisions relating to the child. The child's parents can no longer make decisions for the child while there is a guardianship. The parents' rights are suspended—not terminated—as long as a guardian is appointed for a minor.

- c. **Education** - As guardian of the person of the child, you are responsible for the child's education. You determine where the child should attend school. As the child's advocate within the school system, you should attend conferences and play an active role in the child's education. For younger children, you may want to consider enrolling the child in Head Start or other similar programs. For older children, you should consider their future educational needs such as college or a specialized school. You must assist the child in obtaining services if the child has special educational needs. You should help the child in setting and attaining his or her educational goals.

- d. **Residence** - As guardian, you have the right to determine where the child lives. The child will normally live with you, but when it is necessary, you are allowed to make other arrangements if it is in the best interest of the child. You should obtain court approval before placing the child back with his or her parents.

As guardian, you **do not** have the right to change the child's residence to a place outside of California unless you first receive the court's permission. If the court grants permission, California law requires that you establish legal guardianship in the state where the child will be living. Individual states have different rules regarding guardianships. You should seek additional information about guardianships in the state where you want the child to live.

(Continued on reverse)

GUARDIAN OF (Name):	CASE NUMBER:
MINOR	

- e. Medical treatment** - As guardian, you are responsible for meeting the medical needs of the child. In most cases, you have the authority to consent to the child's medical treatment. However, if the child is 14 years or older, surgery may not be performed on the child unless either (1) both the child and the guardian consent or (2) a court order is obtained that specifically authorizes the surgery. This holds true except in emergencies. A guardian may not place a child involuntarily in a mental health treatment facility under a probate guardianship. A mental health conservatorship proceeding is required for such an involuntary commitment. However, the guardian may secure counseling and other necessary mental health services for the child. The law also allows older and more mature children to consent to their own treatment in certain situations such as outpatient mental health treatment, medical care related to pregnancy or sexually transmitted diseases, and drug and alcohol treatment.
- f. Community resources** - There are agencies in each county that may be helpful in meeting the specific needs of children who come from conflicted, troubled, or deprived environments. If the child has special needs, you must strive to meet those needs or secure appropriate services.
- g. Financial support** - Even when the child has a guardian, the parents are still obligated to financially support the child. The guardian may take action to obtain child support. The child may also be eligible for Temporary Aid for Needy Families, TANF (formerly known as AFDC), social security benefits, Veterans Administration benefits, Indian child welfare benefits, and other public or private funds.
- h. Visitation** - The court may require that you allow visitation or contact between the child and his or her parents. The child's needs often require that the parent-child relationship be maintained, within reason. However, the court may place restrictions on the visits, such as the requirement of supervision. The court may also impose other conditions in the child's best interest.
- i. Driver's license** - As guardian of the person, you have the authority to consent to the minor's application for a driver's license. If you consent, you will become liable for any civil damages that may result if the minor causes an accident. The law requires that anyone signing the DMV application obtain insurance to cover the minor.
- j. Enlistment in the armed services** - The guardian may consent to a minor's enlistment in the armed services. If the minor enters into active duty with the armed forces, the minor becomes emancipated under California law.
- k. Marriage** - For the minor to marry, the guardian **and the court** must give permission. If the minor enters a valid marriage, the minor becomes emancipated under California law.
- l. Change of address** - A guardian must notify the court in writing of any change in the address of either the child or the guardian. This includes any changes that result from the child's leaving the guardian's home or returning to the parent's home. You **must** always obtain **court permission** before you move the child to another state or country.
- m. Court visitors and status reports** - Some counties have a program in which "court visitors" track and review guardianships. If your county has such a program, you will be expected to cooperate with all requests of the court visitor. As guardian, you may also be required to fill out and file status reports. In all counties, you must cooperate with the court and court investigators.
- n. Misconduct of the child** - A guardian, like a parent, is liable for the harm and damages caused by the willful misconduct of a child. There are special rules concerning harm caused by the use of a firearm. If you are concerned about your possible liability, you should consult an attorney.
- o. Additional responsibilities** - The court may place other conditions on the guardianship or additional duties upon you, as guardian. For example, the court may require the guardian to complete counseling or parenting classes, to obtain specific services for the child, or to follow a scheduled visitation plan between the child and the child's parents or relatives. As guardian, you must follow all court orders.

(Continued on page three)

GUARDIAN OF (Name):	CASE NUMBER:
MINOR	

- p. Termination of guardianship of the person** - A guardianship of the person automatically ends when the child reaches the age of 18, is adopted, marries, is emancipated by court order, enters into active military duty, or dies. If none of these events has occurred, the child, a parent, or the guardian may petition the court for termination of guardianship. But it must be shown that the guardianship is no longer necessary or that termination of the guardianship is in the child's best interest.

2. GUARDIANSHIP OF THE ESTATE

If the court appoints you as *guardian of the child's estate*, you will have additional duties and obligations. The money and other assets of the child are called the child's "estate." Appointment as guardian of a child's estate is taken very seriously by the court. The guardian of the estate is required to manage the child's funds, collect and make an inventory of the assets, keep accurate financial records, and regularly file financial accountings with the court.

MANAGING THE ESTATE

- a. Prudent investments** - As guardian of the estate, you must manage the child's assets with the care of a prudent person dealing with someone else's property. This means that you must be cautious and may not make speculative or risky investments.
- b. Keeping estate assets separate** - As guardian of the estate, you must keep the money and property of the child's estate separate from everyone else's, including your own. When you open a bank account for the estate, the account name must indicate that it is a *guardianship* account and not your personal account. You should use the child's social security number when opening estate accounts. You should never deposit estate funds in your personal account or otherwise mix them with your own funds or anyone else's funds, even for brief periods. Securities in the estate must be held in a name that shows that they are estate property and not your personal property.
- c. Interest-bearing accounts and other investments** - Except for checking accounts intended for ordinary expenses, you should place estate funds in interest-bearing accounts. You may deposit estate funds in insured accounts in federally insured financial institutions, but you should not put more than \$100,000 in any single institution. You should consult with an attorney before making other kinds of investments.
- d. Blocked accounts** - A *blocked account* is an account with a financial institution in which money is placed. No person may withdraw funds from a blocked account without the court's permission. Depending on the amount and character of the child's property, the guardian may elect **or the court may require** that estate assets be placed in a blocked account. As guardian of the estate, you must follow the directions of the court and the procedures required to deposit funds in this type of account. The use of a blocked account is a safeguard and may save the estate the cost of a bond.
- e. Other restrictions** - As guardian of the estate, you will have many other restrictions on your authority to deal with estate assets. Without prior court order, you **may not** pay fees to yourself or your attorney. You may not make a gift of estate assets to anyone. You may not borrow money from the estate. As guardian, you may not use estate funds to purchase real property without a prior court order. If you do not obtain the court's permission to spend estate funds, you may be compelled to reimburse the estate from your own personal funds and may be removed as guardian. You should consult with an attorney concerning the legal requirements relating to sales, leases, mortgages, and investment of estate property. If the child of whose estate you are the guardian has a living parent or if that child receives assets or is entitled to support from another source, you must obtain court approval before using guardianship assets for the child's support, maintenance, or education. You must file a petition or include a request for approval in the original petition, and set forth which exceptional circumstances justify any use of guardianship assets for the child's support. The court will ordinarily grant such a petition for only a limited period of time, usually not to exceed one year, and only for specific and limited purposes.

INVENTORY OF ESTATE PROPERTY

- f. Locate the estate's property** - As guardian of the estate, you must locate, take possession of, and protect the child's income and assets that will be administered in the estate. You must change the ownership of all assets into the guardianship estate's name. For real estate, you should record a copy of your *Letters of Guardianship* with the county recorder in each county where the child owns real property.

(Continued on reverse)

GUARDIAN OF (Name): MINOR	CASE NUMBER:
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- g. Determine the value of the property** - As guardian of the estate, you must arrange to have a court-appointed referee determine the value of the estate property unless the appointment is waived by the court. You—not the referee—must determine the value of certain "cash items." An attorney can advise you about how to do this.
- h. File an inventory and appraisal** - As guardian of the estate, you must file an inventory and appraisal within 90 days after your appointment. You may be required to return to court 90 days after your appointment as guardian of the estate to ensure that you have properly filed the inventory and appraisal.

INSURANCE

- i. Insurance coverage** - As guardian of the estate, you should make sure that there is appropriate and sufficient insurance covering the assets and risks of the estate. You should maintain the insurance in force throughout the entire period of the guardianship or until the insured asset is sold.

RECORD KEEPING AND ACCOUNTING

- j. Records** - As guardian of the estate, you must keep complete, accurate records of each financial transaction affecting the estate. The checkbook for the guardianship checking account is essential for keeping records of income and expenditures. You should also keep receipts for all purchases. Record keeping is critical because you will have to prepare an accounting of all money and property that you have received, what you have spent, the date of each transaction, and its purpose. You will also have to be able to describe in detail what is left after you have paid the estate's expenses.
- k. Accountings** - As guardian of the estate, you must file a petition requesting that the court review and approve your accounting one year after your appointment and at least every two years after that. The court may ask that you justify some or all expenditures. You should have receipts and other documents available for the court's review, if requested. If you do not file your accounting as required, the court will order you to do so. You may be removed as guardian for failure to file an accounting.
- l. Format** - As guardian of the estate, you must comply with all state and local rules when filing your accounting. A particular format is specified in the Probate Code, which you must follow when you present your account to the court. You should check local rules for any special local requirements.
- m. Legal advice** - An attorney can advise you and help you prepare your inventories, accountings, and petitions to the court. If you have questions, you should consult with an attorney.

3. OTHER GENERAL INFORMATION

- a. Removal of a guardian** - A guardian may be removed for specific reasons or when it is in the child's best interest. A guardian may be removed either on the court's own motion or by a petition filed by the child, a relative of the child, or any other interested person. If necessary, the court may appoint a successor guardian, or the court may return the child to a parent if that is found to be in the child's best interest.
- b. Legal documents** - For your appointment as guardian to be valid, the *Order Appointing Guardian of Minor* must be signed. Once the court signs the order, the guardian **must** go to the clerk's office, where *Letters of Guardianship* will be issued. *Letters of Guardianship* is a legal document that provides proof that you have been appointed and are serving as the guardian of a minor. You should obtain several certified copies of the *Letters* from the clerk. These legal documents will be of assistance to you in the performance of your duties, such as enrolling the child in school, obtaining medical care, and taking care of estate business.
- c. Attorneys and legal resources** - If you have an attorney, the attorney will advise you on your duties and responsibilities, the limits of your authority, the rights of the child, and your dealings with the court. **If you have legal questions, you should consult with your attorney.** Please remember that the court staff cannot give you legal advice.

(Continued on page five)

GUARDIAN OF (Name):	MINOR	CASE NUMBER:
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If you are not represented by an attorney, you may obtain answers to your questions by contacting community resources, private publications, or your local law library.

NOTICE: This statement of duties is a summary and is not a complete statement of the law. Your conduct as a probate guardian is governed by the law itself and not by this summary.

ACKNOWLEDGMENT OF RECEIPT

1. I have petitioned the court to be appointed as a guardian.
2. I acknowledge that I have received a copy of this statement of the duties of the position of guardian.

Date:

(TYPE OR PRINT NAME)

▶

(SIGNATURE OF PETITIONER)

Date:

(TYPE OR PRINT NAME)

▶

(SIGNATURE OF PETITIONER)

Date:

(TYPE OR PRINT NAME)

▶

(SIGNATURE OF PETITIONER)

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, State Bar number, and address):</i> <hr/> <p style="text-align: center;">TELEPHONE NO.: FAX NO. <i>(Optional):</i></p> <p>E-MAIL ADDRESS <i>(Optional):</i></p> <p>ATTORNEY FOR <i>(Name):</i></p>	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: <i>(This section applies only to family law cases.)</i> RESPONDENT: OTHER PARTY:	
GUARDIANSHIP OF <i>(Name):</i> Minor <i>(This section applies only to guardianship cases.)</i>	CASE NUMBER:
DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)	

1. I am a party to this proceeding to determine custody of a child.
2. My present address and the present address of each child residing with me is confidential under Family Code section 3429 as I have indicated in item 3.
3. There are *(specify number):* _____ minor children who are subject to this proceeding, as follows:
(Insert the information requested below. The residence information must be given for the last FIVE years.)

a. Child's name		Place of birth	Date of birth	Sex
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with <i>(name and complete current address)</i> <input type="checkbox"/> Confidential		Relationship
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>		
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>		
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>		
b. Child's name		Place of birth	Date of birth	Sex
<input type="checkbox"/> Residence information is the same as given above for child a. <i>(If NOT the same, provide the information below.)</i>				
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with <i>(name and complete current address)</i> <input type="checkbox"/> Confidential		Relationship
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>		
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>		
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>		

- c. Additional residence information for a child listed in item a or b is continued on attachment 3c.
- d. Additional children are listed on form FL-105(A)/GC-120(A). *(Provide all requested information for additional children.)*

SHORT TITLE: _____	CASE NUMBER: _____
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4. Do you have information about, or have you participated as a party or as a witness or in some other capacity in, another court case or custody or visitation proceeding, in California or elsewhere, concerning a child subject to this proceeding?
 Yes No (If yes, attach a copy of the orders (if you have one) and provide the following information):

Proceeding	Case number	Court <i>(name, state, location)</i>	Court order or judgment <i>(date)</i>	Name of each child	Your connection to the case	Case status
a. <input type="checkbox"/> Family						
b. <input type="checkbox"/> Guardianship						
c. <input type="checkbox"/> Other						

Proceeding	Case Number	Court <i>(name, state, location)</i>
d. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency		
e. <input type="checkbox"/> Adoption		

5. One or more domestic violence restraining/protective orders are now in effect. (Attach a copy of the orders if you have one and provide the following information):

Court	County	State	Case number <i>(if known)</i>	Orders expire <i>(date)</i>
a. <input type="checkbox"/> Criminal				
b. <input type="checkbox"/> Family				
c. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency				
d. <input type="checkbox"/> Other				

6. Do you know of any person who is not a party to this proceeding who has physical custody or claims to have custody of or visitation rights with any child in this case? Yes No (If yes, provide the following information):

a. Name and address of person <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child	b. Name and address of person <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child	c. Name and address of person <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child
---	---	---

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: _____

 (TYPE OR PRINT NAME)

 (SIGNATURE OF DECLARANT)

7. Number of pages attached: _____

NOTICE TO DECLARANT: You have a continuing duty to inform this court if you obtain any information about a custody proceeding in a California court or any other court concerning a child subject to this proceeding.

GUARDIANSHIP OF (name):	CASE NUMBER:
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NOTICE TO INSTITUTIONS AND FINANCIAL INSTITUTIONS
(Probate Code sections 2890–2893)

When these *Letters of Guardianship* (Letters) are delivered to you as an employee or other representative of an *institution* or *financial institution* (described below) in order for the guardian of the estate (1) to take possession or control of an asset of the minor named above held by your institution (including changing title, withdrawing all or any portion of the asset, or transferring all or any portion of the asset) or (2) to open or change the name of an account or a safe-deposit box in your financial institution to reflect the guardianship, you must fill out Judicial Council form GC-050 (for an institution) or form GC-051 (for a financial institution). An officer authorized by your institution or financial institution must date and sign the form, and you must file the completed form with the court.

There is no filing fee for filing the form. You may either arrange for personal delivery of the form or mail it to the court for filing at the address given for the court on page 1 of these Letters.

The guardian should deliver a blank copy of the appropriate form to you with these Letters, but it is your institution's or financial institution's responsibility to complete the correct form, have an authorized officer sign it, and file the completed form with the court. If the correct form is not delivered with these Letters or is unavailable for any other reason, blank copies of the forms may be obtained from the court. The forms may also be accessed from the judicial branch's public website free of charge. The Internet address (URL) is www.courts.ca.gov/forms.htm. Select the form group *Probate—Guardianships and Conservatorships* and scroll down to form GC-050 for an institution or form GC-051 for a financial institution. The forms may be printed out as blank forms and filled in by typewriter (nonfillable form) or may be filled out online and printed out ready for signature and filing (fillable form).

An *institution* under California Probate Code section 2890(c) is an insurance company, insurance broker, insurance agent, investment company, investment bank, securities broker-dealer, investment advisor, financial planner, financial advisor, or any other person who takes, holds, or controls an asset subject to a conservatorship or guardianship other than a financial institution. Institutions must file a *Notice of Taking Possession or Control of an Asset of Minor or Conservatee* (form GC-050) for an asset of the minor or conservatee held by the institution. A single form may be filed for all affected assets held by the institution.

A *financial institution* under California Probate Code section 2892(b) is a bank, trust (including a Totten trust account but excluding other trust arrangements described in Probate Code section 82(b)), savings and loan association, savings bank, industrial bank, or credit union. Financial institutions must file a *Notice of Opening or Changing a Guardianship or Conservatorship Account or Safe-Deposit Box* (form GC-051) for an account or a safe-deposit box held by the financial institution. A single form may be filed for all affected accounts or safe-deposit boxes held by the financial institution.

LETTERS OF GUARDIANSHIP
AFFIRMATION

I solemnly affirm that I will perform according to law the duties of guardian.

Executed on (date): _____, at (place): _____

_____ (TYPE OR PRINT NAME)	_____ (SIGNATURE OF APPOINTEE)
-------------------------------	-----------------------------------

CERTIFICATION

I certify that this document, including any attachments, is a correct copy of the original on file in my office, and that the Letters issued to the person appointed above have not been revoked, annulled, or set aside, and are still in full force and effect.

(SEAL)

Date: _____

Clerk, by _____, Deputy

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NO.: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
GUARDIANSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (name):	
ORDER APPOINTING GUARDIAN OR EXTENDING GUARDIANSHIP OF THE PERSON	CASE NUMBER:
WARNING: THIS APPOINTMENT IS NOT EFFECTIVE UNTIL LETTERS HAVE ISSUED.	

1. The petition for appointment of a guardian or extension of a guardianship of the person came on for hearing as follows (check boxes c, d, and e to indicate personal presence):

- a. Judge (name):
- b. Hearing date: Time: Dept.: Room:
- c. Petitioner (name):
- d. Attorney for Petitioner (name):
- e. Attorney for (proposed) ward (name, address, e-mail, and telephone):

THE COURT FINDS

- 2. a. All notices required by law have been given.
- b. Notice of hearing to the following persons has been should be dispensed with (names):
- 3. Appointment of a guardian of the person estate of the proposed ward is necessary or convenient. (NOTE: The Probate Code does not authorize the appointment of a guardian of the estate for a proposed ward 18 years of age or older.)
- 4. Extension of the guardianship of the person past the ward's 18th birthday is necessary or convenient.
- 5. Granting the guardian powers to be exercised independently under Probate Code section 2590 is to the advantage and benefit and is in the best interest of the guardianship estate.
- 6. Attorney (name): _____ has been appointed by the court as legal counsel to represent the (proposed) ward in these proceedings. The cost for representation is: \$ _____
- 7. The appointed court investigator, probation officer, or domestic relations investigator is (name, title, address, and telephone): _____

Do NOT use this form for a temporary guardianship.

GUARDIANSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (name):	CASE NUMBER:
---	--------------

THE COURT ORDERS

8. a. (name):
 (address): (telephone):

is appointed guardian of the PERSON of (name):
 and Letters shall issue upon qualification.

b. (Not applicable to a proposed ward 18 years of age or older.)
 (name):
 (address): (telephone):

is appointed guardian of the ESTATE of (name):
 and Letters shall issue upon qualification.

c. The appointment of
 (name):
 (address): (telephone):

as guardian of the PERSON of (name):
 is extended past the ward's 18th birthday and new Letters shall issue forthwith.

9. Notice of hearing to the persons named in item 2b is dispensed with.

10. a. Bond is not required.
 b. Bond is fixed at: \$ to be furnished by an authorized surety company or as otherwise provided by law.
 c. Deposits of: \$ are ordered to be placed in a blocked account at (specify institution and location):

and receipts shall be filed. No withdrawals shall be made without a court order.
 Additional orders in Attachment 10c.

d. The guardian is not authorized to take possession of money or any other property without a specific court order.

11. For legal services rendered on behalf of the (proposed) ward, the parents of the (proposed) ward
 the (proposed) ward's estate shall pay to (name):
 the sum of: \$
 forthwith as follows (specify terms, including any combination of payers):

12. The guardian of the estate is granted authorization under Probate Code section 2590 to exercise independently the powers specified in Attachment 12 subject to the conditions provided.

13. Orders are granted relating to the powers and duties of the guardian of the person under Probate Code sections 2351–2358 as specified in Attachment 13.

GUARDIANSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF <i>(name):</i>	CASE NUMBER:
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- 14. Orders are granted relating to the conditions imposed under Probate Code section 2402 upon the guardian of the estate as specified in Attachment 14.
- 15. Other orders as specified in Attachment 15 are granted.
- 16. The probate referee appointed is *(name and address):*

17. Number of boxes checked in items 9–16: _____

18. Number of pages attached: _____

Date:

 JUDGE OF THE SUPERIOR COURT

SIGNATURE FOLLOWS LAST ATTACHMENT

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): TELEPHONE NO.: _____ FAX NO. (<i>Optional</i>): _____ E-MAIL ADDRESS (<i>Optional</i>): _____ ATTORNEY FOR (<i>Name</i>): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
<input type="checkbox"/> GUARDIANSHIP <input type="checkbox"/> CONSERVATORSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (<i>Name</i>): <input type="checkbox"/> MINOR <input type="checkbox"/> (PROPOSED) CONSERVATEE	
NOTICE OF HEARING—GUARDIANSHIP OR CONSERVATORSHIP	CASE NUMBER: _____

**This notice is required by law.
This notice does not require you to appear in court, but you may attend the hearing if you wish.**

1. NOTICE is given that (*name*):
(*representative capacity, if any*):
has filed (*specify*):

2. You may refer to documents on file in this proceeding for more information. (*Some documents filed with the court are confidential. Under some circumstances you or your attorney may be able to see or receive copies of confidential documents if you file papers in the proceeding or apply to the court.*)

3. The petition includes an application for the independent exercise of powers by a guardian or conservator under Probate Code section 2108 Probate Code section 2590.
Powers requested are specified below specified in Attachment 3.

4. A HEARING on the matter will be held as follows:

a. Date:	Time:	Dept.:	Room:
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 b. Address of court same as noted above is (*specify*):

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available upon request if at least 5 days notice is provided. Contact the clerk's office for *Request for Accommodations by Persons with Disabilities and Order* (form MC-410). (Civil Code section 54.8.)



<input type="checkbox"/> GUARDIANSHIP <input type="checkbox"/> CONSERVATORSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (Name): _____ <div style="text-align: center; margin-top: 10px;"> <input type="checkbox"/> MINOR <input type="checkbox"/> (PROPOSED) CONSERVATEE </div>	CASE NUMBER: _____
--	--------------------

PROOF OF PERSONAL SERVICE OF NOTICE OF HEARING—GUARDIANSHIP OR CONSERVATORSHIP

(Attach a separate completed and signed copy of this form or other proof of personal service to Notice of Hearing—Guardianship or Conservatorship for each person who personally served a copy of the Notice.)

1. I am over the age of 18 and not a party to this cause.
2. I served the attached *Notice of Hearing—Guardianship or Conservatorship* by personally delivering a copy to each person listed below at the address and on the date and time indicated below.
3. I served with the attached *Notice of Hearing—Guardianship or Conservatorship* a copy of the petition or other document referred to in the Notice.
4. I served with the attached *Notice of Hearing—Guardianship or Conservatorship* copies of the following documents *(specify)*:

 Continued on Attachment 4.
5. I am *(check all that apply)*:
 - a. not a registered California process server.
 - b. a California sheriff or marshal.
 - c. a registered California process server.
 - d. an employee or independent contractor of a registered California process server.
 - e. exempt from registration (Bus. & Prof. Code, § 22350(b)).
6. My name, address, telephone number, and, if applicable, county of registration and number, are *(specify)*:

NAME OF EACH PERSON PERSONALLY SERVED, ADDRESS WHERE SERVED, AND DATE AND TIME SERVICE WAS MADE

	<u>Name</u>	<u>Address where served (number, street, city, and state)</u>	<u>Date and time service made</u>
1.			Date: _____ Time: _____
2.			Date: _____ Time: _____
3.			Date: _____ Time: _____
4.			Date: _____ Time: _____

List of names and addresses of persons personally served by the undersigned continued on an attachment.
(You may use Attachment to Notice of Hearing Proof of Personal Service, form DE-120(PA)/GC-020(PA), for this purpose.)

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

(For California sheriff or marshal use only)
I certify that the foregoing is true and correct

Date: _____

Date: _____

▶ _____

▶ _____

(SIGNATURE)

(SIGNATURE)

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO

CASE NO.: _____

vs.

CERTIFICATE OF ASSIGNMENT

A civil action or proceeding presented for filing must be accompanied by this Certificate. If the ground is the residence of a party, name and residence shall be stated.

The undersigned declares that the above-entitled matter is filed for proceedings in the _____ District of the Superior Court under Rule 404 of this court for the

checked reason:

General

Collection

Nature of Action

Ground

- | | |
|---|--|
| <input type="checkbox"/> 1. Adoption | Petitioner resides within the district |
| <input type="checkbox"/> 2. Conservator | Petitioner or conservatee resides within the district. |
| <input type="checkbox"/> 3. Contract | Performance in the district is expressly provided for. |
| <input type="checkbox"/> 4. Equity | The cause of action arose within the district. |
| <input type="checkbox"/> 5. Eminent Domain | The property is located within the district. |
| <input type="checkbox"/> 6. Family Law | Plaintiff, defendant, petitioner or respondent resides within the district. |
| <input type="checkbox"/> 7. Guardianship | Petitioner or ward resides within the district or has property within the district. |
| <input type="checkbox"/> 8. Harassment | Plaintiff, defendant, petitioner or respondent resides within the district. |
| <input type="checkbox"/> 9. Mandate | The defendant functions wholly within the district. |
| <input type="checkbox"/> 10. Name Change | The petitioner resides within the district. |
| <input type="checkbox"/> 11. Personal Injury | The injury occurred within the district. |
| <input type="checkbox"/> 12. Personal Property | The property is located within the district. |
| <input type="checkbox"/> 13. Probate | Decedent resided or resides within the district or had property within the district. |
| <input type="checkbox"/> 14. Prohibition | The defendant functions wholly within the district. |
| <input type="checkbox"/> 15. Review | The defendant functions wholly within the district. |
| <input type="checkbox"/> 16. Title to Real Property | The property is located within the district. |
| <input type="checkbox"/> 17. Transferred Action | The lower court is located within the district. |
| <input type="checkbox"/> 18. Unlawful Detainer | The property is located within the district. |
| <input type="checkbox"/> 19. Domestic Violence | The petitioner, defendant, plaintiff or respondent resides within the district. |
| <input type="checkbox"/> 20. Other _____ | _____ |
| <input type="checkbox"/> 21. THIS FILING WOULD | NORMALLY FALL WITHIN JURISDICTION OF SUPERIOR COURT |

The address of the accident, performance, party, detention, place of business, or other factor which qualifies this case for filing in the above-designed district is:

NAME – INDICATE TITLE OR OTHER QUALIFYING FACTOR

ADDRESS

CITY

STATE

ZIP CODE

I declare, under penalty of perjury, that the foregoing is true and correct and that this declaration was executed on _____ at _____, California

Signature of Attorney/Party

CERTIFICATE OF ASSIGNMENT

CONFIDENTIAL
 SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO
 REFERRAL FOR CII/CARPOS/ICMS REPORT
 (GUARDIANSHIP/CONSERVATORSHIP)

Case Number	Ex Parte Hearing Date	Department
This Section to be Completed by Filing Party		
Petitioner Name: <div style="float: right; text-align: center;"> Male Female </div>	Petitioner Former Name:	
Petitioner AKAs, if any:	Petitioner Date of Birth:	Petitioner SSN:
Second Petitioner Name: <div style="float: right; text-align: center;"> Male Female </div>	Second Petitioner Former Name:	
Second Petitioner AKAs, if any:	Second Petitioner Date of Birth:	Second Petitioner SSN:
Other Member of Household 18 Years Old & Older: <div style="float: right; text-align: center;"> MALE FEMALE </div> NAME:	Date of Birth:	SSN:
Other Member of Household 18 Years Old & Older: <div style="float: right; text-align: center;"> MALE FEMALE </div> NAME:	Date of Birth:	SSN:
Other Member of Household 18 Years Old & Older: <div style="float: right; text-align: center;"> MALE FEMALE </div> NAME:	Date of Birth:	SSN:
Name of Minor's Natural Mother:	Date of Birth:	SSN:
Name of Minor's Natural Father:	Date of Birth:	SSN:

COURT ORDER:

- This matter is referred to Family Law Processing for a CARPOS (CLETS) history report and a Criminal History Inquiry (CII) pursuant to Family Code 6306 and/or California Rule of Court 5.445.
- This matter is referred to Family Law Processing for a search of the Superior Court of California, County of San Bernardino Integrated Case Management System for a history report regarding existing custody and visitation orders pursuant to CRC 5.445.

Form A1

This form is required with all Guardianship/Conservatorship filings.
 SB-13548 (Rev. 01/18/13)

Order Dispensing With Notice

This form is only needed if you ask in your regular guardianship petition that someone not receive notice.

Declaration of Diligent Search

To apply for guardianship, you must provide proper legal notice to certain relatives of the child.

There are 3 ways to comply with this requirement:

1. Provide actual legal notice
2. Relative signs Consent & Waiver of Notice
3. Court excuses notice because of diligent search

Required Notice:

- Personal service on each parent of the minor of the petition for appointment plus the petition for temporary guardianship (if any)
- Personal service on any minor who is at least 12 years old of the petition for appointment plus the petition for temporary guardianship (if any)
- Service by mail on the grandparents (both sides) and any brothers/sisters who are at least 12 years old of the petition

Excused Notice:

If you cannot locate the relative, fill out the Declaration of Diligent Search form. You must write down all your attempts to locate this person.

Ideas: Call people who might know where the relative is living; call the employer; mail a letter to last known address asking post office for forwarding address; do a search on the internet & 411

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	<i>FOR COURT USE ONLY</i>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
<input type="checkbox"/> GUARDIANSHIP <input type="checkbox"/> CONSERVATORSHIP OF: (Name): _____	
REQUEST TO EXCUSE NOTICE With DUE DILIGENCE DECLARATION	CASE NUMBER: _____
The law requires that certain people receive notice of these proceedings as a matter of fairness under the Constitution. When the address of such a person is unknown and cannot be located, the Court <i>may</i> excuse notice upon a showing of a diligent search. NOTE: False statements or failure to give notice where notice was required, may result in a dismissal of the case	

1. The name of the person I cannot locate is: _____
2. The relationship between this person and the minor(s) or conservatee in this case is: _____.
3. The last known address for this person is: _____ and
the approximate date when the person was last known to live there is: _____.
4. MY ATTEMPTS TO LOCATE INCLUDE THE FOLLOWING: (*You must complete each item*)
 - a. **RELATIVES** – I contacted the following relatives of the person I cannot locate:
 Name and Relationship: _____
 Date of Contact and Results: _____
 Name and Relationship: _____
 Date of Contact and Results: _____
 There are no known relatives to contact.
 - b. **FRIENDS** – I contacted the following friends, acquaintances and previous neighbors of the person I cannot locate:
 Name and Date of Contact: _____
 Results: _____
 Name and Date of Contact: _____
 Results: _____
 There are no known friends, acquaintances or previous neighbors to contact.
 - c. **EMPLOYERS** – I contacted the following employers or former employers of the person I cannot locate:

(Name of Business)	(Address and Telephone Number)
(Name of Business)	(Address and Telephone Number)

 Date of Contact and Results: _____
 There are no known employers to contact.

GUARDIANSHIP/CONSERVATORSHIP/PROBATE OF (Name):	CASE NUMBER:
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d. INTERNET – I conducted an Internet search on _____ and the results received:

(Date(s))

Website: _____ Result: _____

e. TELEPHONE – I reviewed the telephone directories and/or contacted directory assistance on _____.

(Date)

Results: _____

f. PUBLIC RECORDS – I searched the real and personal property indexes in the Recorder's and Assessor's Offices of _____ County on _____.

(County Name) (Date)

Results: _____

g. PRISONS AND JAILS – I contacted the applicable criminal justice agency (such as California Department of Corrections Locator Service at (916) 445-6713), on _____.

(Date)

Results: _____

Not applicable.

5. OTHER INFORMATION or facts that explain why I cannot locate this person's address and notice them:

All attachments to this form are incorporated by this reference as though placed here in this form.

6. There are _____ pages attached to this form.

(Number of Pages)

REQUEST:

Despite my diligent efforts, I have not been able to find the person listed in Item 1 and therefore I ask that the Court excuse notice to this person.

I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT.

Date:

(TYPE OR PRINT NAME)

(SIGNATURE)