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Code:
(Your name) _____

(Address) _____

(Telephone) _____

In Proper Person

IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA

IN AND FOR THE COUNTY OF _____

In the Matter of the Guardianship of _____)

the person, _____)

the estate, _____)

the person and estate, _____)

CASE NO. _____

DEPT. NO: _____

of: _____)

_____, _____)

_____, and _____)

_____, _____)

Minor Children. _____)

_____)

CONFIDENTIAL INFORMATION SHEET

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Information for First Proposed Ward

	Ward's Mother	Ward's Father	1 st Proposed Ward	Guardian	Co-Guardian
Date of Birth					
Taxpayer ID Number					
Valid Driver's License Number					
Valid ID Card Number					
Valid Passport Number					
Social Security Number					

A copy of the above identification is attached.

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Information for Second Proposed Ward

	Ward's Mother	Ward's Father	2nd Proposed Ward	Guardian	Co- Guardian
Date of Birth					
Taxpayer ID Number					
Valid Driver's License Number					
Valid ID Card Number					
Valid Passport Number					
Social Security Number					

A copy of the above identification is attached.

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Information for Third Proposed Ward

	Ward's Mother	Ward's Father	3rd Proposed Ward	Guardian	Co- Guardian
Date of Birth					
Taxpayer ID Number					
Valid Driver's License Number					
Valid ID Card Number					
Valid Passport Number					
Social Security Number					

A copy of the above identification is attached.

SUBMITTED BY:

(Petitioner's name)