

1 Code:
(Your name) _____
2
3 (Your address) _____
4 _____
5 (Telephone) _____

In Proper Person

7 IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
8 IN AND FOR THE COUNTY OF _____

10 In the Matter of the Guardianship)
of the Person only)
11 Estate only)
12 Person and Estate)
13 of:)
14 _____)
15 _____)
16 _____)
17 A(n) Minor.)
 Adult.)
18 _____)

CASE NO. _____
DEPT. NO. _____

19 **CONFIDENTIAL MEDICAL/EDUCATIONAL INFORMATION SHEET**

20 **(Attach any doctor's statements or medical records, or report cards or other educational**
21 **records regarding the ward's health or education to this sheet.)**

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