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Code:  
(Your name) \_\_\_\_\_

(Your 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. \_\_\_\_\_

\_\_\_\_\_, )

\_\_\_\_\_, and )

\_\_\_\_\_)

Minor Children. )

\_\_\_\_\_ )

**ADDENDUM TO PETITION FOR GUARDIANSHIP OF A MINOR**  
**REQUESTING IMMEDIATE TEMPORARY GUARDIANSHIP**

\_\_\_\_\_ and \_\_\_\_\_  
(Name of Petitioner) (Name of Co-Petitioner)

Petitioner(s) in this matter, state(s) as follows:

1. A Verified Petition for Guardianship was filed herein on \_\_\_\_\_  
(Date Petition was filed)

by the above-named Petitioner(s) to be appointed guardians of the following minors(s):

<u>Name</u>	<u>Age</u>	<u>Date of Birth</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. This Request For Immediate Temporary Guardianship is made for the following

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reasons:

***Check the boxes that apply. More than one box may be checked; however, at least one must be checked to qualify for a temporary guardianship. You must explain, in detail, each statement you checked.***

- The minor(s) face(s) a substantial and immediate risk of physical harm;
- The minor(s) need(s) immediate medical attention;
- The minor(s) face(s) a substantial and immediate risk of financial loss;

**Explain in detail why:**

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***(If you need more space, you may attach additional pages. Be sure the pages clearly indicate they are a continuation of this portion of the document.)***

1 3. Petitioner(s) (have or have not) \_\_\_\_\_ tried in good faith to notify the  
2 following people of this Request For Immediate Guardianship:

3 ***Print "yes" or "no" to ALL of the following questions and fill in the information in the  
4 appropriate spaces for those questions you answered with a "yes."***

5 **Paragraph 4 is to be answered regarding child #1 only.**

6 4. \_\_\_\_\_ Mother of the minor child(ren) on \_\_\_\_\_  
7 (yes or no) (date contact was made)  
8  In person  By telephone  In writing

9 \_\_\_\_\_ Father of the minor child(ren) on \_\_\_\_\_  
10 (yes or no) (date contact was made)  
11  In person  By telephone  In writing

12 \_\_\_\_\_ Maternal Grandparents of the minor child(ren) on \_\_\_\_\_  
13 (yes or no) (date contact was made)  
14  In person  By telephone  In writing

15 \_\_\_\_\_ Paternal Grandparents of the minor child(ren) on \_\_\_\_\_  
16 (yes or no) (date contact was made)  
17  In person  By telephone  In writing

18 \_\_\_\_\_ Current Legal Guardians of the minor child(ren) on \_\_\_\_\_  
19 (yes or no) (date contact was made)  
20  In person  By telephone  In writing

21 \_\_\_\_\_ Brothers and/or Sisters of the minor child(ren) who are over the age of 14  
22 (yes or no)  
23 years on \_\_\_\_\_  
24 (date contact was made)  
25  In person  By telephone  In writing

26 \_\_\_\_\_ Current Legal Guardians of any brothers and sisters of the minor child(ren)  
27 (yes or no)  
28 who are under the age of 14 years on \_\_\_\_\_  
(date contact was made)  
 In person  By telephone  In writing

29 **Paragraph 5 is to be answered regarding child #2 only.**

30 5. \_\_\_\_\_ Mother of the minor child(ren) on \_\_\_\_\_  
31 (yes or no) (date contact was made)  
32  In person  By telephone  In writing

33 \_\_\_\_\_ Father of the minor child(ren) on \_\_\_\_\_

1 (yes or no) (date contact was made)  
2  In person  By telephone  In writing

3 \_\_\_\_\_ Maternal Grandparents of the minor child(ren) on \_\_\_\_\_  
4 (yes or no) (date contact was made)  
5  In person  By telephone  In writing

6 \_\_\_\_\_ Paternal Grandparents of the minor child(ren) on \_\_\_\_\_  
7 (yes or no) (date contact was made)  
8  In person  By telephone  In writing

9 \_\_\_\_\_ Current Legal Guardians of the minor child(ren) on \_\_\_\_\_  
10 (yes or no) (date contact was made)  
11  In person  By telephone  In writing

12 \_\_\_\_\_ Brothers and/or Sisters of the minor child(ren) who are over the age of 14  
13 (yes or no)  
14 years on \_\_\_\_\_  
15 (date contact was made)  
16  In person  By telephone  In writing

17 \_\_\_\_\_ Current Legal Guardians of any brothers and sisters of the minor child(ren)  
18 (yes or no)  
19 who are under the age of 14 years on \_\_\_\_\_  
20 (date contact was made)  
21  In person  By telephone  In writing

22 **Paragraph 6 is to be answered regarding child #3 only.**

23 6. \_\_\_\_\_ Mother of the minor child(ren) on \_\_\_\_\_  
24 (yes or no) (date contact was made)  
25  In person  By telephone  In writing

26 \_\_\_\_\_ Father of the minor child(ren) on \_\_\_\_\_  
27 (yes or no) (date contact was made)  
28  In person  By telephone  In writing

\_\_\_\_\_ Maternal Grandparents of the minor child(ren) on \_\_\_\_\_  
(yes or no) (date contact was made)  
 In person  By telephone  In writing

\_\_\_\_\_ Paternal Grandparents of the minor child(ren) on \_\_\_\_\_  
(yes or no) (date contact was made)  
 In person  By telephone  In writing

\_\_\_\_\_ Current Legal Guardians of the minor child(ren) on \_\_\_\_\_  
(yes or no) (date contact was made)



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***(If you need more space, you may attach additional pages. Be sure the pages clearly indicate they are a continuation of this portion of the pleading.)***

Dated \_\_\_\_\_

Dated \_\_\_\_\_

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(Signature of Petitioner)

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(Signature of Co-Petitioner)

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**VERIFICATION OF PETITIONER**

STATE OF NEVADA )  
 )  
COUNTY OF \_\_\_\_\_ )

I, (your name) \_\_\_\_\_, being first duly sworn under penalty of perjury, hereby depose and say:

That I am the Petitioner in the within action; that I have read the foregoing Addendum to the Petition For Guardianship Requesting Immediate Temporary Guardianship and know the contents thereof; that the same is true of my knowledge except as to those matters therein stated upon information and belief and as to those matters, I believe them to be true.

\_\_\_\_\_  
Petitioner

SIGNED and SWORN to before me by (Petitioner's name) \_\_\_\_\_  
on the \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

**ACKNOWLEDGMENT OF PETITIONER**

STATE OF NEVADA )  
 )  
COUNTY OF \_\_\_\_\_ )

On this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me, the undersigned Notary Public in and for the said County and State, personally appeared (your name) \_\_\_\_\_  
\_\_\_\_\_ known to me to be the person described in and who executed the foregoing instrument, and who acknowledged to me that he/she did so freely and voluntarily and for the purposes and uses and purposes therein mentioned.

WITNESS my hand and official seal.

\_\_\_\_\_  
NOTARY PUBLIC

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**VERIFICATION OF CO-PETITIONER**

STATE OF NEVADA )  
 )  
COUNTY OF \_\_\_\_\_ )

I, (co-petitioner's name) \_\_\_\_\_, being first duly sworn under penalty of perjury, hereby depose and say:

That I am the Co-Petitioner in the within action; that I have read the foregoing Addendum to the Petition For Guardianship Requesting Immediate Temporary Guardianship and know the contents thereof; that the same is true of my knowledge except as to those matters therein stated upon information and belief and as to those matters, I believe them to be true.

\_\_\_\_\_ Co-Petitioner

SIGNED and SWORN to before me by (Co-Petitioner's name) \_\_\_\_\_ on the \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

**ACKNOWLEDGMENT OF CO-PETITIONER**

STATE OF NEVADA )  
 )  
COUNTY OF \_\_\_\_\_ )

On this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me, the undersigned Notary Public in and for the said County and State, personally appeared (co-petitioner's name) \_\_\_\_\_ known to me to be the person described in and who executed the foregoing instrument, and who acknowledged to me that he/she did so freely and voluntarily and for the purposes and uses and purposes therein mentioned.

WITNESS my hand and official seal.

\_\_\_\_\_  
NOTARY PUBLIC