

1 Code:
2 (Your name) _____

3 (Address) _____

4 _____

5 (Telephone) _____

6 In Proper Person

7 IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA

8 IN AND FOR THE COUNTY OF _____

9
10 In the Matter of the Guardianship of)

11 the person,)

CASE NO. _____

12 the estate,)

DEPT. NO: _____

13 the person and estate.)

14 of:)

15 _____)

An Adult.)

16 _____)

17 **PETITION FOR APPOINTMENT OF GUARDIAN(S)**

18 **COME NOW**, Petitioner (your name) _____ and
19 (co-petitioner's name) _____, in accordance with Chapter
20 159 of the Nevada Revised Statutes, whose petition respectfully represents the following to
21 this Honorable Court:

22 **Information Regarding the Petitioner(s)**

23
24 1. That Petitioner(s) would like to be appointed the general guardian over (proposed
25 ward's name) _____.

26 2. That Petitioner's full legal name is _____.

27 3. That Petitioner currently resides at (street/city/state/zip) _____

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4. That Petitioner’s mailing or post office address is _____

_____.

5. The Petitioner’s date of birth is _____.

6. That Co-Petitioner’s full legal name is _____

_____.

7. That Co-Petitioner currently resides at (street/city/state/zip) _____

_____.

8. That Co-Petitioner’s mailing or post office address is _____

_____.

9. The Co-Petitioner’s date of birth is _____.

10. That Petitioner **(check one)** has/ has not been judicially determined to have committed abuse, neglect or exploitation of a child, spouse, parent or other person.

11. That Co-Petitioner **(check one)** has/ has not been judicially determined to have committed abuse, neglect or exploitation of a child, spouse, parent or other person.

12. **(Check All that Apply)**

That Petitioner has never been convicted of a felony.

That Petitioner has been convicted of a felony (description of conviction)

_____ and **(check one)** was/ was not placed on parole and **(check one)** was/ was not placed on probation for such felony.

That Co-Petitioner has never been convicted of a felony.

That Co-Petitioner has been convicted of a felony (description of conviction) _____ and **(check one)**

was/ was not placed on parole and **(check one)** was/ was not placed on probation for such felony.

13. That Petitioner(s) have not been suspended for misconduct or disbarred from the practice of law, the practice of accounting or any other profession which involves the management or sale of money, investments, securities or real property and requires licensure

1 in Nevada or any other state.

2 14. That Petitioner is the (relationship) _____ of the
3 proposed ward and Co-Petitioner is the (relationship) _____
4 of the proposed ward. Petitioner(s) are competent and capable of acting as guardians of the
5 **(check one)** person/ estate/ person and estate of the ward, and hereby consent to act in
6 this capacity.

7 15. **(Check All that Apply)**

8 That Petitioner is not a private professional guardian and is not currently
9 receiving compensation for services as a guardian to more than one ward who are not related to
10 Petitioners by blood or marriage.

11 That the Petitioner is a private professional guardian. (Copies of
12 documents proving that Petitioner meets the requirements of a “private professional guardian”
13 will be filed with this Petition.)

14 That Co-Petitioner is not a private professional guardian and is not
15 currently receiving compensation for services as a guardian to more than one ward who are not
16 related to Petitioners by blood or marriage.

17 That the Co-Petitioner is a private professional guardian. (Copies of
18 documents proving that Co-Petitioner meets the requirements of a “private professional
19 guardian” will be filed with this Petition.)

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23 **Information Regarding the Proposed Ward**

24 16. That the proposed ward, (proposed ward’s name) _____
25 _____, age _____ was born on (date of birth) _____.

26 17. That the proposed ward currently resides at (street/city/state/zip) _____
27 _____.

28 The proposed ward has lived at this address for _____ days/ months/ years.

1 18. The name and address of any person or care provider having the care and control
2 of the proposed ward is (name/address of care provider) _____

3 _____
4 The current care provider has cared for the proposed ward because _____
5 _____
6 _____

7 19. That the proposed ward is a resident of the State of _____

8 20. The proposed ward has executed the following: **(Check all that apply):**

9 Revocable/living trust. The current trustee is _____,
10 and the successor trustee(s) are _____

11 Durable power of attorney for health care. The agent is _____
12 _____

13 Durable power of attorney for financial matters. The agent is _____
14 _____

15 Written nomination of guardian. The agent is _____
16 _____

17 None of the above

18 Copies of the documents checked above will be filed with this Petition.

19 21. The names and addresses of the following relatives of the ward are:

20
21 **Attach an additional page to the end of this document if you need more**
22 **room to list all of the ward's relatives.**

23

Relative's Name	Relationship to Ward	Address (street address/city/state/zip code)
	Mother	
	Father	

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	Grandmother on Ward's mother's side	
	Grandfather on Ward's mother's side	
	Grandmother on Ward's father's side	
	Grandfather on Ward's father's side	
	Ward's Spouse	
	Brother/Sister	

22. That a general guardianship is needed for the proposed ward because: _____

Information Regarding the Proposed Ward's Estate

23. That the proposed ward (**check all that apply**) has no assets or income / has assets/ is or will be entitled to assets or income.

24. That the ward (**check one**) does / does not receive money from the Department of Veterans Affairs.

1 25. The types of assets and/or income are: (if none, write "N/A" on first blank)

2 a. _____ value: \$ _____

3 b. _____ value: \$ _____

4 c. _____ value: \$ _____

5 d. _____ value: \$ _____

6
7 These funds will be safeguarded by: **(Check one)**

8 being placed into a blocked account.

9 a bond which the Petitioners will obtain in an amount set by the court.

10 **General Information**

11 26. That the guardianship **(check one)** is/ is not sought for the purpose of
12 initiating litigation.

13
14 27. That the proposed ward **(check one)** is/ is not a party to any pending criminal
15 or civil litigation.

16 28. That documentation demonstrating the need for a guardianship **(check one)**
17 will be filed when/if it becomes available to the Petitioners/ will be filed at the same time
18 the Petition is filed.

19 29. That a copy of the following form(s) of identification will be filed with the
20 Confidential Information Sheet **(check all that apply for the Petitioners and the Proposed**
21 **Ward)**

22 a. For the Petitioner: Social Security Number/ Taxpayer Identification
23 Number/ Valid Driver's License Number/ Valid Identification Card Number/ Valid
24 Passport Number

25
26 b. For the Co-Petitioner: Social Security Number/ Taxpayer Identification
27 Number/ Valid Driver's License Number/ Valid Identification Card Number/ Valid
28 Passport Number

1 c. For the Proposed Ward: Social Security Number/ Taxpayer Identification
2 Number/ Valid Driver's License Number/ Valid Identification Card Number/ Valid
3 Passport Number

4
5 30. That Petitioner (**check one**) has/ has not been appointed as guardian over the
6 proposed ward in a state other than Nevada. If Petitioner has been appointed Guardian over
7 the proposed ward in another state, Petitioner will file an exemplified copy of the guardianship
8 order with this Court.

9 31. That Co-Petitioner (**check one**) has/ has not been appointed as guardian over
10 the proposed ward in a state other than Nevada. If Co-Petitioner has been appointed Guardian
11 over the proposed ward in another state, Co-Petitioner will file an exemplified copy of the
12 guardianship order with this Court.

13 32. That Petitioner(s) (**check one**) are not/ are requesting special powers as
14 follows (see NRS 159.117 through 159.175 for the only special powers that may be
15 requested): _____

16 _____
17 _____
18 _____
19 _____
20 _____.

21 WHEREFORE, Petitioner(s) pray that this guardianship be granted and for such other
22 and further relief as the court may deem just and proper.

23 DATED this ____ day of _____, _____.

24
25 _____
26 Petitioner

27 _____
28 Co-Petitioner

1 **VERIFICATION OF PETITIONER**

2 STATE OF NEVADA)
3 COUNTY OF _____)

4 I, (your name) _____, being first duly sworn under penalty
5 of perjury, hereby depose and say:

6 That I am the Petitioner in the within action; that I have read the foregoing Petition For
7 Appointment of Guardian(s) and know the contents thereof; that the same is true of my
8 knowledge except as to those matters therein stated upon information and belief and as to
9 those matters, I believe them to be true.

10 _____

Petitioner

11 SIGNED and SWORN to before me by (Petitioner's name) _____

12 on the ____ day of _____, ____.

13 _____
14 NOTARY PUBLIC

15 **ACKNOWLEDGMENT OF PETITIONER**

16 STATE OF NEVADA)
17 COUNTY OF _____)

18 On this ____ day of _____, _____, before me, the undersigned
19 Notary Public in and for the said County and State, personally appeared (your name)

20 _____ known to me to be the person described in and
21 who executed the foregoing instrument, and who acknowledged to me that **(check one)**

22 he/ she did so freely and voluntarily and for the uses and purposes therein mentioned.

23 WITNESS my hand and official seal.

24 _____
25 NOTARY PUBLIC

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 Petition For Appointment of Guardian(s) 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 **(check one)**

he/ she did so freely and voluntarily and for the uses and purposes therein mentioned.

WITNESS my hand and official seal.

NOTARY PUBLIC