How to ask for a General Guardianship

☐ **Step 1** Fill out forms	**Use blue or black ink to complete the following forms:** ☒ (GC-210(P)) Petition for Appointment of Guardian of the Person ☒ (GC-210(CA)) Guardianship Petition-Child Information Attachment **(One for EACH child in the case)** ☒ (ICWA-010(A)) Indian Child Inquiry Attachment **(One for EACH child in the case)** ☒ (GC-120) Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) ☐ (GC-211) Consent of Proposed Guardian, Nomination of Guardian and Waiver of Notice ☒ (GC-020) Notice of Hearing and attachments ☒ (GC-020(P)) Proof of Personal Service of Notice of Hearing and attachments ☒ (GC-240) Order Appointing Guardian of Minor ☒ (GC-250) Letters of Guardianship ☒ PB-4003-2a Confidential Document Cover Sheet (Guardianship) ☒ (GC-212) Confidential Guardian Screening Form **(One for EACH Proposed Guardian)** ☒ (PB-4014) Authorization for Release of Information ☒ (GC-248) Duties of Guardian ☒ (PB-4005) Referral for Court Investigator & Questionnaire – Guardianship ☒ (FW-001-GC) Request to Waive Court Fees **(One for EACH child in the case)** ☒ (FW-003-GC) Order on Court Fee Waiver **(One for EACH child in the case)**
☐ **Step 2**	Make **2 copies**, in addition to the original.
☐ **Step 3** File original & copies There is a filing fee *unless the fee is waived.*	**Turn in the original and copies to the PROBATE CLERK'S OFFICE located at:** **191 North First Street, San Jose, CA 95113** The Clerk's Office opens at 8:30am Monday-Friday, closing times are subject to change, visit www.scscourt.org or call **408-882-2100** for current office hours. ☐ **If you are not asking for a fee waiver**, you will pay the filing fee and get file-stamped copies back when you file. ☐ **If you are asking for a fee waiver**, your file-stamped copies may be returned immediately, OR you may be asked to return in up to 24 hours, OR your file stamped forms may be mailed to you. Please check with the clerk who takes your forms.
☐ **Step 4** Serve Copies	**Service:** Have your forms served – See "How to Complete Service in a Guardianship Case"
☐ **Step 5** What happens next…	**Go to your court hearing:** Bring a copy of all the papers in your case and also bring any papers which help to prove the information in your Petition. If you have any witnesses, they should also come. The child does **NOT** need to attend the hearing **unless the *child* is the Petitioner.** If you need help speaking English, please bring an interpreter to your hearing.

Please turn over for important information

WHAT IS A GUARDIANSHIP?

These instructions are for a Probate Guardianship of the Person. This is when the Court appoints an adult who is not the child's parent to take care of the child. The guardian has the same responsibilities as a parent. The guardian has sole legal and physical custody of the child, meaning that he/she can make all the decisions about the child's welfare, as well as have the child live with him/her. The Court can grant a guardianship even if the parents disagree. For more information, read *Forms and Instructions to Become a Probate Guardian*, which is available at the Self-Help Center/Family Law Facilitator's Office.

WHAT HAPPENS AFTER I FILE MY GUARDIANSHIP PACKET?

You will have a court hearing date in about 9-10 weeks, which will be stated on the front of the *Notice of Hearing* (GC-020). There will also be an investigation by the Probate Investigator's Office before the hearing.

HOW LONG DOES IT TAKE TO FINISH THE GUARDIANSHIP PROCESS?

At the hearing, in about 9-10 weeks, the Judge will decide whether you will be appointed as the child's guardian. If additional investigation needs to take place, another hearing date will be set.

HOW CAN I GET HELP?

Here are some ways to get help:

- Go to http://www.calbar.ca.gov/Public, then click on "Lawyer Referral services" to hire or consult with a private attorney.
- For free legal advice and information, see our "Do-It-Yourself Resources" flyer. Go to www.scscourt.org, click on "Self-Help" then "Self-Help Flyers".
- The Self Help Center/Family Law Facilitator – See our information flyer:
    - Contact us: Go to www.scscourt.org then click "***Contact the Self Help Center***". Walk-in assistance is limited to emergencies so contact us remotely first.
    - Obtain Forms: Go to www.scscourt.org then click "***Complete Forms at Home***"
    - Form Review: Email your forms as a PDF file to SHCDocReview@scscourt.org.
    - Note: We **cannot** help people who have attorneys**.**

Superior Court, County of Santa Clara
Self Help Center/Family Law Facilitator's Office
201 N. First Street, San Jose, CA 95113
408-882-2926

BLANKS

General Guardianship

Please complete the following forms in blue or blank ink.

GC-210(P)

Petition for Appointment of Guardian of the Person

Guardianship of the person of *(all children's names):*

_____

_____

You may use this form or the **Petition for Appointment of Guardian of Minor** ***(form GC-210) to petition, or ask, the court to appoint a guardian of the person.*** **(You must use form GC-210 to ask the court to appoint a guardian of the estate or of both the person and the estate.)**

Clerk stamps date here when form is filed.

Fill in court name and street address:

Superior Court of California, County of
Santa Clara
191 N. First Street
191 N. First Street
San Jose, CA 95113
Probate Courthouse - DTS

Clerk fills in information below when form is filed.

Case Number:	
Hearing Date and Time:	**Dept.:**

(1) **Your name** *(include the names of all persons who are requesting the court to appoint them or the person named in (4) as guardian for the child* or children* named above and in (8). All must sign this form.):*

a. _____

b. _____

c. _____

(2) **Your address and telephone number:**

Street: _____ *Apt.:* _____

City: _____

State: ____ *Zip:* _____ *Phone:* _____

(3) ☒ **Your Lawyer** *(if you have one):*

Name: **Self-Represented** _____ *Bar No.:* _____

Firm name, if any: _____

Street: _____ *Suite:* _____

City: _____ *State:* ____ *Zip:* _____

Phone: _____ *Fax:* _____ *E-mail:* _____

(4) ☒ **I/We want to be guardian of the child or children named in (8)** *(Go to (5).)*

☐ **I/We want the person or persons named here to be the guardian of the child or children named in (8).** *Tell the court about the proposed guardian(s) below.*

Name(s):

Street: _____ *Apt.:* _____

City: _____ *State:* _____ *Zip:* _____

Phone: _____ *E-mail:* _____

☐ **I am the child or one of the children named in (8) and a person named in (1). I am at least 12 years old. I want the person or persons named here to be my guardian. My date of birth is** *(month/day/year):* _____ *Tell the court about the proposed guardian(s) below.*

Name(s):

Street: _____ *Apt.:* _____

City: _____ *State:* _____ *Zip:* _____

Phone: _____ *E-mail:* _____

***Under section 1510.1(d) of the Probate Code, the terms *child, minor,* and *ward* include a youth 18 to 20 years of age.**

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Guardianship of the person of *(all children's names):* _____ _____ _____	**Case Number:**

5 The proposed guardian named in 1 or 4 is *(check all that apply):*

a. ☐ Related to the child or children named in 8, as shown in item 3 of the child's or children's attached *Guardianship Petition - Child Information Attachment* (form(s) GC-210(CA)).

b. ☐ Not related to the child or children named in 8.

c. ☐ A nominee of a parent of one or more of the children named in 8, as shown in item 5 of the child's or children's attached *Guardianship Petition - Child Information Attachment* (form(s) GC-210(CA)).

6 ☐ Check this box if you checked the box in item 5b (guardian unrelated to child or children). *Answer the question in item a and check the box in item b or c. If you check the box in c, provide the signed statement of the proposed guardian on a separate sheet of paper. Write "Form GC-210(P) - Attachment 6: Statement of Unrelated Guardian" at the top of the paper and attach it to this form.*

a. Does the proposed guardian run a licensed foster family home? ☐ Yes ☐ No

b. ☐ I am the proposed guardian. I will promptly furnish any information requested by an agency investigating an adoption or a local agency designated by the county to provide public social services.

c. ☐ I am **not** the proposed guardian. The signed statement of the proposed guardian agreeing to promptly furnish any information requested by an agency investigating an adoption or a local agency designated by the county to provide public social services is attached to this form as Attachment 6.

7 ☐ A person other than the proposed guardian(s) named in 1 or 4 has been nominated in a will or other writing as guardian of the child or children named in 8. A copy of the written nomination is attached. *Write "Form GC-210(P) - Attachment 7: Nomination of Another Person as Guardian" at the top of the writing and attach it to this form. Fill in the nominated person's name and address in item 2 of the* Guardianship Petition - Child Information Attachment *(form GC-210(CA)) for each child for whom the person was nominated as guardian.*

8 Tell the court about the child or children who need a guardian.

Fill out and attach to this form a separate copy of Guardianship Petition - Child Information Attachment *(form GC-210(CA)) for* each *child named below. Show all children's names at the top of all pages of this form. Fill out and attach to this form a* Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) *(form FL-105/GC-120) concerning all children under 18 years of age listed below.*

The full legal name and date of birth of each child who needs a guardian is *(specify):*

a. Name: _____ Date of birth: _____
First Middle Last *Month/Day/Year*

b. Name: _____ Date of birth: _____
First Middle Last *Month/Day/Year*

c. Name: _____ Date of birth: _____
First Middle Last *Month/Day/Year*

d. Name: _____ Date of birth: _____
First Middle Last *Month/Day/Year*

e. Name: _____ Date of birth: _____
First Middle Last *Month/Day/Year*

☐ *Check here if there are additional children. Continue this list on a separate sheet of paper. Write "Form GC-210(P) - Attachment 8: Additional Children" at the top of the paper and attach it to this form.*

Guardianship of the person of *(all children's names):*	**Case Number:**

9 The guardianship is necessary or convenient for the reasons given below.

(Explain why each child listed in 8 needs a guardian.)

☐ *Check here if you need more space. Continue your explanation on a separate sheet of paper. Write "Form GC-210(P) - Attachment 9: Need for Guardian" at the top of the paper and attach it to this form.*

10 I/We ask the court to *(check all that apply):*

a. Appoint the person named in 1 or 4 guardian of the person of the child or children named in 8 and issue *Letters of Guardianship.*

b. ☐ Excuse me/us from having to give notice of the hearing on this petition to one or more relatives or other persons listed in item 2 of the attached *Guardianship Petition - Child Information Attachment* (form GC-210(CA)) for the reasons given below *(Specify (1) the name of each child, (2) the name and relationship to the child of each of the persons to whom you want the court to excuse you from giving notice, and (3) the reasons for your request, including the steps, if any, you have taken to find each person.):*

☐ *Check here if you need more space. Continue your explanation on a separate sheet of paper. Write "Form GC-210(P) - Attachment 10b: Request for Waiver of Notice" at the top of the paper and attach it to this form.*

The relatives and other persons listed in item 2 of each child's* Guardianship Petition - Child Information Attachment *(form GC-210(CA)) must be given notice of the hearing on your petition for appointment of a guardian for that child unless the court excuses you from giving notice. The court may waive (excuse) this requirement if you can show the court that you do not know where the relative or other person is located after making reasonable efforts to find him or her or if giving notice to that person may harm the child or otherwise be contrary to the interests of justice. See rule 7.52 of the California Rules of Court for information on making reasonable efforts to find a person.

Guardianship of the person of *(all children's names):*	**Case Number:**

10 c. ☐ Make the following additional orders *(specify):*

☐ *Check here if you need more space. Continue your request for additional orders on a separate sheet of paper. Write "Form GC-210(P) - Attachment 10c: Additional Orders" at the top of the paper and attach it to this form.*

11 **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 or Conservator* (form GC-110)
- ☐ *Petition for Appointment of Temporary Guardian of the Person* (form GC-110(P))
- ☒ *Confidential Guardian Screening Form* (form GC-212)
- ☐ *Petition for Special Immigrant Juvenile Findings* (form GC-220)
- ☒ Other *(specify):*

Duties of Guardianship

12 All attachments are made part of this form as though included here. There are _____ pages attached to this form.

Date: _____ _____ ▶ _____
Petitioner's attorney types or prints name here *Petitioner's attorney signs here*

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

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

Date: _____ _____ ▶ _____
Petitioner types or prints name here *Petitioner signs here*

Date: _____ _____ ▶ _____
Petitioner types or prints name here *Petitioner signs here*

I consent to the appointment of the person named in 1 or 4 as guardian of my person and to his or her performance of the duties of a guardian on my behalf.

Date: _____ _____ ▶ _____
Proposed ward types or prints name here *Proposed ward signs here*

GC-210(CA)

Child Information Attachment to Probate Guardianship Petition

Case Number:

Guardianship of *(all children's names):* _____

This child's name: _____

Fill out a separate copy of this form for **each child** for whom your petition asks the court to appoint a guardian.

This form is attached to the Petition, ☐ **form GC-210, item 2,** or ☒ **form GC-210(P), item 8.**

The petition asks the court to appoint 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* *mm/dd/yyyy*

b. Child's current address: _____

c. Indian child inquiry *(Complete only if your petition asks the court to appoint a guardian of this child's person or person and estate. If your petition asks the court to appoint a guardian of this child's estate only, skip this item and go to item 1d.)*

☐ I have asked whether the child is or may be a member of one or more Indian tribes recognized by the federal government, or eligible for membership in such a tribe and the biological child of a tribal member, and whether the child or parents live or are domiciled on a reservation or rancheria or in an Alaskan Native village. Form ICWA-010(A), *Indian Child Inquiry Attachment*, is attached to this form.

☐ I have not asked about the child's Indian heritage because the parents are unavailable or deceased.

(For more information about your duties under the federal Indian Child Welfare Act (ICWA) (25 U.S.C. §§ 1901–1963) and California law, including making the inquiry and completing form ICWA-010(A) if the child is or may be an Indian child, see Information Sheet on Indian Child Inquiry Attachment 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 married in the past 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.)

e. Is this child receiving public benefits? ☐ Yes ☐ No ☐ I don't know *(If you checked "Yes," fill out below.)*

Type of Aid	Monthly Benefit	Type of Aid	Monthly Benefit
☐ TANF (Temporary Asst. for Needy Families)	$	☐ Other *(explain):*	$
☐ Social Security	$	☐ Other *(explain):*	$
☐ 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 in f. with legal custody.)*
Name and address of the person this child lives with (who takes care of the child): _____

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Guardianship of *(all children's names):* _____

Case Number:

This child's name: _____

1 Tell the court about this child (continued)

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

Type of Case	Court District or County and State or Tribe	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 State Hospitals.)* Write the name of the institution here:

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

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

☐ *(Check here if this child has additional relatives, including parents, grandparents, siblings, or half-siblings, 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 Relatives" at the top of the paper and attach it to this form.)*

Guardianship of *(all children's names):* _____

Case Number:

This child's name: _____

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

Relationship	Name	Home Address (Street, City, State, Zip)
Spouse *(Guardianship of the estate only)*		
Person nominated as guardian of this child *(if someone other than a proposed guardian listed in 3)*		
Indian custodian *(if any)*		
Child's tribe *(if any and if known)*		

☐ *(Check here if there is more than one tribe that the child may be eligible for membership in, and list the names and addresses on a separate sheet of paper. Write "Form GC-210(CA)," the name of the child, and "Attachment 2: Child's tribes" at the top of the paper and attach it to this form.)*

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 relationship(s) to the child of each proposed relative guardian):* _____

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

c. Did the child's parent(s) nominate the proposed guardian(s)? ☐ Yes ☐ No ☐ I don't know
(If you checked "Yes," attach the written nominatation as Attachment 3c.)

d. Does this child currently live with the proposed guardian(s)? ☐ Yes ☐ No ☐ I don't know
If "Yes," how long has the child lived with the proposed guardian(s)? *(years, months):* _____

e. If the court approves the guardianship, will this child live with the proposed guardian(s)? ☐ Yes ☐ No

f. Does/do the proposed guardian(s) currently plan to adopt this child? ☐ Yes ☐ No ☐ I don't know

4 *Explain why appointing a guardian for the child named in 1 would be in the child's best interest:*

_____

☐ *(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 4: Guardianship—Best Interest of Child" at the top of the paper and attach it to this form.)*

Guardianship of *(all children's names):* _____

Case Number:

This child's name: _____

5 *Explain why appointing the person named in* 3 *to be this child's guardian would be in the child's best interest:*

_____

☐ *(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 5: Proposed Guardian—Best Interest of Child" at the top of the paper and attach it to this form.)*

6 a. Does one or do both of this child's parents agree:

(1) That the court needs to appoint a guardian for the child?

Parent *(name):* _____ ☐ Yes ☐ No ☐ I don't know

Parent *(name):* _____ ☐ Yes ☐ No ☐ I don't know

(2) That the person named in 3 should be the child's guardian?

Parent *(name):* _____ ☐ Yes ☐ No ☐ I don't know

Parent *(name):* _____ ☐ Yes ☐ No ☐ I don't know

b. If the child is an Indian child and in the care and custody of an Indian custodian, does the Indian custodian agree:

(1) That the court needs to appoint a guardian for the child?

Custodian *(name):* _____ ☐ Yes ☐ No ☐ I don't know

(2) That the person named in 3 should be the child's guardian?

Custodian *(name):* _____ ☐ Yes ☐ No ☐ I don't know

7 ☐ **Check this box if you (the petitioner) are not the person named in 3, and fill in below.**

Your relationship to this child:

☐ Relative *(especify relationship):* _____

☐ Not a relative *(explain your interest in or connection to this child):*

_____

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

CHILD'S NAME:	CASE NUMBER:

1. Name of child:

2. (Check one)

☐ I have not yet been able to complete the inquiry about the child's Indian status because:

I understand that I have an affirmative and continuing duty to complete this inquiry. I will do it as soon as possible and advise the court of my efforts.

☐ I have asked or ☐ I am advised by: and on information and belief confirm that this person has completed inquiry by asking the child, the child's parents, and other required and available persons about the child's Indian status. Each of these persons was asked whether they had any information that the child is or may be an Indian child; whether the parents or child are or were domiciled or lived on a reservation, rancheria, Alaska Native village, or other tribal trust land, or had ancestors who were members of an Indian tribe. The person(s) questioned are:

Name:	Name:
Address:	Address:
City, state, zip:	City, state, zip:
Telephone:	Telephone:
Date questioned:	Date questioned:
Relationship to child:	Relationship to child:

☐ Additional persons questioned and their information is attached. *(Form MC-020 may be used for this purpose.)*

3. This inquiry *(check one)*

☐ gave me reason to believe the child is or may be an Indian child. *(If checked, continue to 4.)*

☐ gave me no reason to believe the child is or may be an Indian child. *(If checked, continue to signature page at end of form.)*

4. ☐ I contacted the tribe(s) that the child may be affiliated with and worked with them to establish whether the child is a member or citizen or eligible for membership or citizenship in the tribe(s). Information detailing the tribes contacted, the names of the individuals contacted, and the manner of the contacts is attached.

5. Based on inquiry and tribal contacts *(check all that apply):*

a. ☐ the child is or may be a member or citizen of or eligible for membership or citizenship in a tribe.
Name of tribe(s):
Location of tribe(s):

b. ☐ the child's parents, grandparents, or great-grandparents are or were members or citizens of a tribe.
Name of tribe(s):
Location of tribe(s):

c. ☐ the residence or domicile of the child, child's parents, or Indian custodian is on a reservation, rancheria, Alaska Native village, or other tribal trust land.

d. ☐ 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).

e. ☐ the child is or has been a ward of a tribal court.
Name of tribe(s):
Location of tribe(s):

f. ☐ either parent or the child possesses an Indian identification card indicating membership or citizenship in an Indian tribe.
Name of tribe(s):
Location of tribe(s):

CHILD'S NAME:	CASE NUMBER:

6. If this is a delinquency proceeding under Welfare and Institutions Code section 601 or 602,
   - ☐ the child is in foster care.
   - ☐ it is probable the child will be entering foster care.

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)

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NUMBER:

NAME:

FIRM NAME:

STREET ADDRESS:

CITY: STATE: ZIP CODE:

TELEPHONE NO.: FAX NO.:

EMAIL ADDRESS:

ATTORNEY FOR *(name)*: Self-Represented

FOR COURT USE ONLY

SUPERIOR COURT OF CALIFORNIA, COUNTY OF Santa Clara

STREET ADDRESS: 191 N. First Street, San Jose, CA 95113

MAILING ADDRESS: 191 N. First Street, San Jose, CA 95113

CITY AND ZIP CODE:

BRANCH NAME: Probate Division

(This section applies to cases other than probate guardianships.)

PETITIONER:

RESPONDENT:

OTHER PARTY:

CHILD'S NAME (*Juvenile cases only*):

(This section applies only to probate guardianship cases.)

GUARDIANSHIP OF *(name)*:

Minor

CASE NUMBER:

DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)

1. I am *(check one)*: [X] a party to this proceeding to determine custody of a child [ ] the authorized representative of the agency, which is a party to this proceeding to determine custody of a child.

2. There are *(specify number)*: minor children who are subject to this proceeding, as follows *(list oldest child first)*:

Full Name	Date of birth	Place of birth (city and state)
a.		
b.		
c.		
d.		

[ ] Check this box if you need to list more children. *(On form MC-020 or a separate piece of paper, write "FL-105, Attachment 2, Additional Children" at the top, provide all requested information for each additional child, and attach to this form.)*

3. a. [ ] Check this box if there is only one child *or* if all of the children listed in item 2 have lived together for the past five years. *(Provide the current address of the child listed in item 2a and their residence history for the past **five years.** If the current address is confidential under Family Code section 3429, check the box and provide only the state of residence.)*

Dates of residence (Month/Year)		Residence (City, State)	Person child lived with and complete current address	Relationship
From:	To present	[ ] Confidential *(list state only)*	[ ] Confidential *(list state only)*	
From:	To:			
From:	To:			
From:	To:			
From:	To:			

[ ] Additional addresses are listed on Attachment 3a. *(Form MC-020 may be used for this purpose.)*

b. [ ] Check this box if there is more than one child and all the children *have not* lived together for the past five years. *(Attach form FL-105(A)/GC-120(A) and list each other child's current address and their residence history for the past five years.)*

CASE NAME:	CASE NUMBER:

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 *(name, state or tribe, location)*	Court order or judgment *(date)*	Name of each child	Your connection to the case	Case status
a. ☐ Family						
b. ☐ Probate Guardianship						
c. ☐ Other						

Proceeding	Case Number	Court *(name, state or tribe, location)*
d. ☐ Juvenile		
e. ☐ 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 or Tribe	Case Number *(if known)*	Orders expire *(date)*
a. ☐ Criminal				
b. ☐ Family				
c. ☐ Juvenile				
d. ☐ Other				

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

a. Name and address of person:	b. Name and address of person:	c. Name and address of person:
☐ Has physical custody ☐ Claims custody rights ☐ Claims visitation rights	☐ Has physical custody ☐ Claims custody rights ☐ Claims visitation rights	☐ Has physical custody ☐ Claims custody rights ☐ Claims visitation rights
Name of each child:	Name of each child:	Name of each child:

7. ☐ Number of pages attached: _____

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

Date:

_____ (NAME OF DECLARANT)

▶ _____ (SIGNATURE OF DECLARANT)

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.

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address)* :	*FOR COURT USE ONLY*
(Your Full Legal Name) (Your Street Address) (Apt #) (City) (Zip) TELEPHONE NO.: FAX NO.*(Optional)*: E-MAIL ADDRESS *(Optional)*: ATTORNEY FOR *(Name)* : **Self-Represented**	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF **Santa Clara** STREET ADDRESS: **191 N. First Street** MAILING ADDRESS: **191 N. First Street** CITY AND ZIP CODE: **San Jose, CA 95113** BRANCH NAME: **Probate Courthouse - DTS**	
GUARDIANSHIP OF THE ☒ PERSON ☐ ESTATE OF *(Name)* :	
☐ **CONSENT OF PROPOSED GUARDIAN** ☐ **NOMINATION OF GUARDIAN** ☐ **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.

Form Adopted for Mandatory Use
Judicial Council of California
GC-211 [Rev. January 1, 2004]

CONSENT OF PROPOSED GUARDIAN, NOMINATION OF GUARDIAN, AND CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE

Probate Code, §§ 1204, 1500-1502

CEB ceb.com Essential Forms

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address)*:

(Your Full Legal Name)

(Your Street Address) (Apt #) (City) (Zip)

TELEPHONE NO.: FAX NO. *(Optional)* :

E-MAIL ADDRESS *(Optional)*:

ATTORNEY FOR *(Name)*: **Self-Represented**

FOR COURT USE ONLY

SUPERIOR COURT OF CALIFORNIA, COUNTY OF Santa Clara

STREET ADDRESS: **191 N. First Street**

MAILING ADDRESS: **191 N. First Street**

CITY AND ZIP CODE: **San Jose, CA 95113**

BRANCH NAME: **Probate Courthouse - DTS**

☒ GUARDIANSHIP ☐ CONSERVATORSHIP OF THE ☒ PERSON ☐ ESTATE

OF *(Name)*:

☒ MINOR ☐ (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)* :
   Petition for appointment of guardian of minor.

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.: **2**	☐ Room:

b. Address of court ☐ same as noted above ☒ is *(specify)* : **Downtown Courthouse**
191 N. First Street
San Jose, CA 95113

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.)

☒ GUARDIANSHIP ☐ CONSERVATORSHIP OF THE ☒ PERSON ☐ ESTATE OF *(Name)*: ☒ MINOR ☐ (PROPOSED) CONSERVATEE	CASE NUMBER:

NOTE:*

A copy of this *Notice of Hearing-Guardianship or Conservatorship* ("Notice") must be "served" on-delivered to-each person who has a right under the law to be notified of the date, time, place and purpose of a court hearing in a guardianship or conservatorship. Copies of this Notice may be served by mail in most situations. In a guardianship, however, copies of this Notice must sometimes be personally served on certain persons; and copies of this Notice may be personally served instead of served by mail in both guardianships and conservatorships. The petitioner (the person who requested the court hearing) **may not personally perform either service by mail or personal service,** but must show the court that copies of this Notice have been served in a way the law allows. The petitioner does this by arranging for someone else to perform the service and complete and sign a proof of service, which the petitioner then files with the original Notice.

This page contains a proof of service that may be used only to show service by mail. To show personal service, each person who performs the service must complete and sign a proof of personal service, and each signed copy of that proof of service must be attached to this Notice when it is filed with the court. You may use form GC-020(P) to show personal service of this Notice.

* *(This Note replaces the clerk's certificate of posting on prior versions of this form. If notice by posting is desired, attach a copy of form GC-020(C),* Clerk's Certificate of Posting Notice of Hearing-Guardianship or Conservatorship. *(See Prob. Code, § 2543(c).)*

PROOF OF SERVICE BY MAIL

1. I am over the age of 18 and not a party to this cause. I am a resident of or employed in the county where the mailing occurred.
2. My residence or business address is *(specify)* :
3. I served the foregoing *Notice of Hearing-Guardianship or Conservatorship* on each person named below by enclosing a copy in an envelope addressed as shown below AND
   a. ☒ **depositing** the sealed envelope with the United States Postal Service on the date and at the place shown in item 4 with the postage fully prepaid.
   b. ☐ **placing** the envelope for collection and mailing on the date and at the place shown in item 4 following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service in a sealed envelope with postage fully prepaid.
4. a. Date mailed: b. Place mailed *(city, state)* :
5. ☒ I served with the *Notice of Hearing-Guardianship or Conservatorship* a copy of the petition or other document referred to in the Notice.

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 PERSON COMPLETING THIS FORM) (SIGNATURE OF PERSON COMPLETING THIS FORM)

NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED

	Name of person served	Address *(number, street, city, state, and zip code)*
1.	**Emergency Response Services**	**Santa Clara County Social Services Agency 333 W. Julian St San Jose, CA 95110**
2.		
3.		
4.		

☐ Continued on an attachment. *(You may use form DE-120(MA)/GC-020(MA) to show additional persons served.)*

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☒ GUARDIANSHIP ☐ CONSERVATORSHIP OF THE ☒ PERSON ☐ ESTATE OF *(Name)* : ☒ MINOR ☐ (PROPOSED) CONSERVATEE	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

	Name	Address where served *(number, street, city, and state)*	Date and time service made
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.

Date:

▶ _____
(SIGNATURE)

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

Date:

▶ _____
(SIGNATURE)

Form Adopted for Optional Use
Judicial Council of California
GC-020(P) [New July 1, 2005]

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Probate Code, §§ 1216, 1264, 1460-1469, 1511, 1822
www.courtinfo.ca.gov

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NO.:	FOR COURT USE ONLY
NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR *(name)*: **Self-Represented**	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Santa Clara STREET ADDRESS: **191 N. First Street** MAILING ADDRESS: **191 N. First Street** CITY AND ZIP CODE: **San Jose, CA 95113** BRANCH NAME: **Probate Courthouse - DTS**	
GUARDIANSHIP OF THE ☒ PERSON ☐ 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)* : **Honorable Amber Rosen**
   b. Hearing date: Time: ☒ Dept.: **2** ☐ 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.

Form Adopted for Mandatory Use
Judicial Council of California
GC-240 [Rev. July 1, 2016]

Probate Code, §§ 1510.1, 1514, 2310

CEB ceb.com Essential Forms

GUARDIANSHIP OF THE ☒ PERSON ☐ 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 payors):*

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 ☒ PERSON ☐ ESTATE OF *(name):*	CASE NUMBER:

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: -0-

Date:

JUDGE OF THE SUPERIOR COURT

☐ SIGNATURE FOLLOWS LAST ATTACHMENT

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NO.:	FOR COURT USE ONLY
NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR *(name)*: **Self-Represented**	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Santa Clara STREET ADDRESS: **191 N. First Street** MAILING ADDRESS: **191 N. First Street** CITY AND ZIP CODE: **San Jose, CA 95113** BRANCH NAME: **Probate Courthouse - DTS**	
GUARDIANSHIP OF *(name)*:	
LETTERS OF GUARDIANSHIP ☒ **Person** ☐ **Estate**	CASE NUMBER:

LETTERS

1. ☒ *(Name)*: is appointed guardian of the ☒ person ☐ estate of *(name)*:

2. ☐ The appointment of *(name)*: as guardian of the person of *(name)*: is extended past the ward's 18th birthday as of *(date)*:

3. ☐ Other powers have been granted and conditions have been imposed as follows:
   a. ☐ Powers to be exercised independently under Probate Code section 2590 are specified in attachment 3a *(specify powers, restrictions, conditions, and limitations)*.
   b. ☐ Conditions relating to the care and custody of the property under Probate Code section 2402 are specified in attachment 3b.
   c. ☐ Conditions relating to the care, treatment, education, and welfare of the ward under Probate Code section 2358 are specified in attachment 3c.
   d. ☐ Other powers granted or conditions imposed are ☐ specified on attachment 3d ☐ specified below.

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

5. The guardianship of the person terminates by operation of law on *(date)*:

6. Number of pages attached: -0-

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

(SEAL)

Date:

Clerk, by _____, Deputy

GUARDIANSHIP OF *(name):*	CASE NUMBER:

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):* San Jose, CA

_____ _____

(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

CEB ceb.com Essential Forms

Confidential Information

The following forms are CONFIDENTIAL for the court and the Department of Social Services.

Since they are private you don’t have to give copies of them to anybody but the Court.

DO NOT SERVE THESE TO ANYONE.

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA COURT ADDRESS: 191 North First Street CITY AND ZIP CODE: San José, California 95113 PHONE NUMBER: (408) 882-2761 FAX NUMBER: (408) 882-2797 BRANCH NAME: Downtown Courthouse - Court Investigator's Division	*FOR COURT USE ONLY*
IN THE MATTER OF GUARDIANSHIP OF:	
CONFIDENTIAL DOCUMENT COVER SHEET (Guardianship)	CASE NUMBER:

RE: GUARDIANSHIPS:

The following documents are confidential and shall be made available only to persons who have been designated by the Court to assist the Court in determining whether a proposed guardian should be appointed.

☐ **Cal. Rules of Court, Rule 7.1001:** Confidential Guardianship Screening Form

☐ **Other:**

Martin Dean's ESSENTIAL FORMS™

CONFIDENTIAL (DO NOT ATTACH TO PETITION)

GC-212

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address)* :	*FOR COURT USE ONLY*
(Your Full Legal Name) (Your Street Address) (Apt #) (City) (Zip) TELEPHONE NO.: FAX NO.*(Optional)*: E-MAIL ADDRESS *(Optional)*: ATTORNEY FOR *(Name)*: **Self-Represented**	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Santa Clara STREET ADDRESS: **191 N. First Street** MAILING ADDRESS: **191 N. First Street** CITY AND ZIP CODE: **San Jose, CA 95113** BRANCH NAME: **Probate Courthouse - DTS**	
GUARDIANSHIP OF *(Name)* : MINOR	CASE NUMBER:
CONFIDENTIAL GUARDIAN SCREENING FORM **Guardianship of ☒ Person ☐ Estate**	HEARING DATE AND TIME: / DEPT.:

The proposed guardian must complete and sign this form. The person requesting appointment of a guardian must submit the completed and signed form to the court with the guardianship petition.
This form must remain confidential.

How This Form Will Be Used

This form is **confidential** and will not be a part of the public file in this case. Each proposed guardian must complete and sign a separate copy of this form under rule 7.1001 of the California Rules of Court. The information provided will be used by the court and by persons and agencies designated by the court to assist the court in determining whether to appoint the proposed guardian as guardian. The proposed guardian **must** respond to each item.

1. a. **Proposed guardian *(name)*:**
   b. Date of birth:
   c. Social security number: d. Driver's license number: State:
   e. Telephone numbers: Home: Work: Other:
2. ☐ I am ☐ I am not required to register as a sex offender under California Penal Code section 290. *(If you checked "I am," explain in Attachment 2.)*
3. ☐ I have ☐ I have not been charged with, arrested for, or convicted of a crime deemed to be a felony or a misdemeanor. *(If you checked "I have," explain in Attachment 3.)*
   ☐ *(Check here if you have been arrested for drug or alcohol-related offenses.)*
4. ☐ I have ☐ I have not had a restraining order or protective order filed against me in the last 10 years. *(If you checked "I have," explain in Attachment 4.)*
5. ☐ I am ☐ I am not receiving services from a psychiatrist, psychologist, or therapist for a mental health-related issue. *(If you checked "I am," explain in Attachment 5.)*
6. Do you, or does any other person living in your home, have a social worker or parole or probation officer assigned to him or her?
   ☐ Yes ☐ No *(If you checked "Yes," explain in Attachment 6 and provide the name and address of each social worker, parole officer, or probation officer.)*
7. Have you, or has any other person living in your home, been charged with, arrested for, or convicted of any form of child abuse, neglect, or molestation? ☐ Yes ☐ No *(If you checked "Yes," explain in Attachment 7.)*
8. ☐ I am ☐ I am not aware of any reports alleging any form of child abuse, neglect, or molestation made to any agency charged with protecting children (e.g., Child Protective Services) or any other law enforcement agency regarding me or any other person living in my home. *(If you checked "I am," explain in Attachment 8 and provide the name and address of each agency.)*
9. Have you, or has any other person living in your home, habitually used any illegal substances or abused alcohol?
   ☐ Yes ☐ No *(If you checked "Yes," explain in Attachment 9.)*

Form Adopted for Mandatory Use
Judicial Council of California
GC-212 [Rev. July 1, 2009]

Probate Code, § 1516;
Family Code, § 3011;
Cal. Rules of Court, rule 7.1001
www.courtinfo.ca.gov

GUARDIANSHIP OF *(Name):* MINOR	CASE NUMBER:

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:

☐ 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.

CEB ceb.com Essential Forms

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name and Address)*: TELEPHONE NUMBER:	*FOR COURT USE ONLY*
_____ **(Your Full Legal Name)** _____ _____ _____ **(Your Street Address)** **(Apt #)** **(City)** **(Zip)** ATTORNEY FOR *(Name)*: **Self-Represented**	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA COURT ADDRESS: 191 North First Street, San José, California 95113 PHONE NUMBER: (408) 882-2651 FAX NUMBER: (408) 882-2693 BRANCH NAME: Downtown Courthouse – Probate Division	
In the Matter of the Guardianship of:	
AUTHORIZATION FOR RELEASE OF INFORMATION	CASE NUMBER:

Probate Code Section 1513 requires that a probate court investigator conduct interviews and write a report and recommendation to the Court concerning the appropriateness of establishing a guardianship for the above-named children. In order to assist in the gathering of pertinent information,

I/we, _____/_____ specifically authorize the release of my/our school records, counseling records, probation records, public and private social service records, summaries of medical and psychological records, and records from any private or public agency which would assist in determination of our petition for guardianship.

Dated:_____ _____

Dated:_____ _____

Original to: Probate Court Investigator

ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, state bar number, and address)* :	*FOR COURT USE ONLY*
(Your Legal First and Last Name) (Your Street Address) (Apt #) (City) (Zip) TELEPHONE NO.: FAX NO.*(Optional)*: E-MAIL ADDRESS *(Optional)*: ATTORNEY FOR *(Name)*: **Self-Represented**	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Santa Clara STREET ADDRESS: **191 N. First Street** MAILING ADDRESS: **191 N. First Street** CITY AND ZIP CODE: **San Jose, CA 95113** BRANCH NAME: **Probate Courthouse - DTS**	
GUARDIANSHIP OF THE ☒ PERSON ☐ 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)

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GUARDIAN OF (Name): MINOR	CASE NUMBER:

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)

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GUARDIAN OF (Name): MINOR	CASE NUMBER:

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)

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GUARDIAN OF (Name): MINOR	CASE NUMBER:

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 acount 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 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. **Attorney 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)

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GUARDIAN OF (Name): MINOR	CASE NUMBER:

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)

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For Court use only:

Temp hrg date: _____

Perm hrg date: _____

REFERRAL FOR COURT INVESTIGATOR & QUESTIONNAIRE - GUARDIANSHIP

Case number (if you have one)**:**_____

Guardianship of (name):_____ ☐ Person ☐ Estate

- **Do you think anyone will disagree with the guardianship?** ☐ Yes ☐ No

  If yes, who? Name:_____Telephone number:_____

- **Has Child Protective Services (CPS) ever been called about the children in this case?** ☐ Yes ☐ No

  If yes, which County: ☐ Santa Clara ☐ Other (County name):_____

  Are there any custody orders about the children in this case? ☐ Yes ☐ No

  If yes, which County: ☐ Santa Clara ☐ Other (County name):_____

  What is the primary language spoken in the home?_____

Information about the CHILDREN

- **Child ❶ Name:** _____
- **Birth Date**:_____
- **Social Security Number**:_____
- **School, Grade, School Telephone Number**: _____

- **Child ❷ Name:**_____
- **Birth Date**:_____
- **Social Security number**:_____
- **School, Grade, School Telephone Number**:_____

- **Child ❸ Name:**_____
- **Birth Date**:_____
- **Social Security Number**:_____
- **School, Grade, School Telephone Number**:_____

☐ Check if there are more children in the case add information about them on another page.

Information about the PROPOSED GUARDIANS'S ATTORNEY

☒ Proposed Guardian doesn't have an attorney

Name:_____ **email**_____-

Address:_____

Phone Number:_____ **Fax Number**:_____

Information about the PROPOSED GUARDIAN(S)

Proposed Guardian ❶:

- **Name**:_____ **email**_____
- **Relationship to child(ren)**: ☐ Grandparent ☐ Aunt/Uncle ☐ Other:_____
- **Birth Date**:_____
- **Social Security Number**:_____
- **Driver's License Number**:_____
- **Home Address**:_____
- **Home Phone Number**:_____ **Cell Phone Number**:_____
- **Work Address**:_____
- **Work Phone Number**:_____ **Fax Number**: _____

Proposed Guardian ❷:

- **Name**: _____ **email**_____
- **Relationship to child(ren)**: ☐ Grandparent ☐ Aunt/Uncle ☐ Other:_____
- **Birth Date**:_____
- **Social Security Number**:_____
- **Driver's License Number**: _____
- **Home Address**:_____
- **Home Phone Number**:_____ **Cell Phone Number**:_____
- **Work Address**:_____
- **Work Phone Number**:_____ **Fax Number**:_____

All proposed Guardians must answer these questions:

1. **Have you ever been convicted of a misdemeanor or felony offense**? ☐ Yes ☐ No

If yes, what offense(s):_____Date:_____County:_____

2. **Is there a social worker, probation or parole officer supervising you or ANY person who lives with you**?
☐ Yes ☐ No

If yes, explain: _____

_____

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

Date:_____ Proposed Guardian 1 signs here:_____

Date:_____ Proposed Guardian 2 signs here:_____

Information about OTHER ADULTS (age 18 or older) WHO LIVE IN YOUR HOME

- **Name**: _____ **email**_____
- **Birth Date**:_____
- **Social Security Number**:_____
- **Driver's License Number**:_____ **State:** _____

- **Name**: _____ **email**_____
- **Birth Date**:_____
- **Social Security Number**:_____
- **Driver's License Number**:_____ **State:**_____

- **Name**: _____ **email**_____
- **Birth Date**:_____
- **Social Security Number**:_____
- **Driver's License Number**:_____ **State:**_____

- **Name**: _____ **email**_____
- **Birth Date**:_____
- **Social Security Number**:_____
- **Driver's License Number**:_____ **State:**_____

- **Name**: _____ **email**_____
- **Birth Date**:_____
- **Social Security Number**:_____
- **Driver's License Number**:_____ **State:**_____

☐ More adults live in my home. I've attached information about them on a separate page.

FW-001-GC Request to Waive Court Fees (Ward or Conservatee)

CONFIDENTIAL

Clerk stamps date here when form is filed.

This form must be used by a guardian or conservator, or by a petitioner for the appointment of a guardian or conservator, to request a waiver of court fees in the guardianship or conservatorship court proceeding or in any other civil action in which the guardian or conservator represents the interests of the ward or conservatee as a plaintiff or defendant.

If the ward or conservatee (including a proposed ward or conservatee if a petition for appointment of a guardian or conservator has been filed but has not yet been decided by the court) directly receives public benefits or is supported by public benefits received by another for their support, is a low-income person, or does not have enough income to pay for their household's basic needs and the court fees, you may use this form to ask the court to waive the court fees. The court may order you to answer questions about the finances of the ward or conservatee. If the court waives the fees, the ward or conservatee, their estate, or someone with a duty to support the ward or conservatee, may still have to pay later if:

- You cannot give the court proof of the ward's or conservatee's eligibility,
- The ward's or conservatee's financial situation improves during this case, or
- You settle the civil case on behalf of the ward or conservatee for **$10,000** or more. The trial court that waives fees will have a lien on any such settlement in the amount of the waived fees and costs. The court may also charge the ward or conservatee, or their estate, any collection costs.

Fill in court name and street address:

Superior Court of California, County of Santa Clara
Street: 191 N. First Street
Mail: 191 N. First Street
San Jose, CA 95113

Fill in case number and name:

Case Number:

Case Name:

1 Your Information *(guardian or conservator, or person asking the court to appoint a guardian or conservator):*

Name: _____ Phone: _____

Street or mailing address: _____

City: _____ State: ____ Zip: _____

2 Your Lawyer *(if you have one):* Name: **Self-Represented**

Firm or Affiliation: _____ State Bar No.: _____

Address: _____ Phone: _____

City: _____ State: ____ Zip: _____ E-mail: _____

a. The lawyer has agreed to advance all or a portion of court fees or costs *(check one):* Yes ☐ No ☐

b. *(If yes, your lawyer must sign here.)* Lawyer's signature: _____
If your lawyer is not providing legal-aid type services based on your or the ward's or conservatee's low income, you may have to go to a hearing to explain why you are asking the court to waive the fees.

3 Ward's or Conservatee's Information *(file a separate* Request *for each ward in a multiward case):*

Name: _____ Age and date of birth *(ward only):*

Street or mailing address: _____ _____ _____

City: _____ State: ____ Zip: _____

Phone: _____

4 Ward's or Conservatee's Lawyer, if any: Name: **Self-Represented**

Firm or Affiliation: _____ State Bar No.: _____

Address: _____ Phone: _____

City: _____ State: ____ Zip: _____ E-mail: _____

5 Ward or Conservatee's Job *(job title; if not employed, so state):* _____

Name of employer: _____

Employer's address: _____ State: _____ Zip: _____

Name of (Proposed) Ward or Conservatee: _____

Case Number:

6 What court's fees or costs are you asking to be waived?

☒ Superior Court (See *Information Sheet on Waiver of Superior Court Fees and Costs* (form FW-001-INFO).)
☐ Supreme Court, Court of Appeal, or Appellate Division of Superior Court (See *Information Sheet on Waiver of Appellate Court Fees* (form APP-015/FW-015-INFO).)

7 ☐ Check here if you asked the court to waive court fees for this case in the last six months.
(If your previous request is reasonably available, please attach it to this form and check here): ☐

8 Why are you asking the court to waive the ward's or conservatee's court fees?

a. ☐ The ward or one or both of the ward's parents, or the conservatee or the conservatee's spouse or registered domestic partner, receive *(check all that apply):*

☐ Supplemental Security Income (SSI) ☐ State Supplemental Payment (SSP) ☐ SNAP (Food Stamps)
☐ IHSS (In-Home Supportive Services) ☐ CalWORKS or Tribal TANF ☐ Medi-Cal
☐ County Relief/General Assistance ☐ CAPI (Cash Assistance Program for Aged, Blind, and Disabled)
☐ Special Supplemental Nutrition Program for Women, Infants, and Children (WIC Program)
☐ Unemployment Compensation

(Names and relationships to ward or conservatee of persons who receive the public benefits listed above):

_____

_____

b. ☐ The gross monthly income of the ward's or conservatee's household (before deductions for taxes) is less than the amount listed below. *(If you check 8b, you **must** fill out items 14, 15, and 16 on page 4 of this form.)**

Family Size	Family Income	Family Size	Family Income	Family Size	Family Income	
1	$2,608.33	3	$4,441.67	5	$6,275.00	*If more than 6 people at home, add $916.67 for each extra person.*
2	$3,525.00	4	$5,358.33	6	$7,191.67	

c. ☐ The ward's or conservatee's household does not have enough income to pay for its basic needs *and* the court fees. I ask the court to *(check one, and you **must** fill out items 14, 15, 16, 17, and 18 on page 4):**

(1) ☐ Waive all court fees and costs. (2) ☐ Waive some court fees and costs.

(3) ☐ Let the (proposed) guardian or conservator, on behalf of the (proposed) ward or conservatee, make payments over time.

** (Do not include income of guardian or conservator living in the household in 8b or 8c or count them in family size in 8b. unless they are a parent of the ward or the spouse or registered domestic partner of the conservatee.)*

Guardians or petitioners for their appointment must complete items 9 and 10.

9 Ward's Estate: ☒ Person only, no estate. ☐ Inventory or petition estimated value:

Source *(e.g., gift, inheritance, settlement, judgment, insurance):* Est. collection date:

10 Ward's Parents' Information:

a. Name of ward's parent: _____ ☐ Deceased *(date of death):* _____
Street or mailing address: _____
City: _____ State: _____ Zip: _____
Phone: _____

b. Name of ward's parent: _____ ☐ Deceased *(date of death):* _____
Street or mailing address: _____
City: _____ State: _____ Zip: _____
Phone: _____

c. Ward's parents are *(check all that apply):* ☐ married ☐ living together ☐ separated ☐ divorced
Support order for ward? ☐ No ☐ Yes Payable to *(name):* _____
Payor *(name):* _____
Court: _____ Case Number: _____
Date of order *(if multiple, date of latest):* _____ Monthly amount: _____

Name of (Proposed) Ward or Conservatee: _____

Case Number:

Conservators or petitioners for their appointment must complete items 11–13.

11 Conservatee's Estate: ☐ Person only, no estate.

☐ Inventory or petition estimated value: Est. collection date:

12 Conservatee's Spouse's or Registered Domestic Partner's Information:

Name of conservatee's spouse or registered domestic partner: _____ ☐ Spouse ☐ Partner

Date of marriage or partnership: _____ ☐ Deceased *(date of death):* _____

Street or mailing address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Name of employer *(if none, so state):* _____

Employer's address: _____ State: _____ Zip: _____

The conservatee's spouse or partner ☐ is ☐ is not managing, or following appointment of a conservator is planning to manage, some or all of the couple's community property outside the conservatorship estate.

If you selected "is" above: The income, money, and property shown on page 4 ☐ includes ☐ does not include the income and property managed, or expected to be managed, by the spouse/partner outside the estate.

☐ Divorced *(date of final judgment or decree):* _____

Court: _____

Case Number: _____ Support order for conservatee? ☐ No ☐ Yes

Date of support order *(if multiple, date of latest):* _____ Monthly amount: _____

13 The Conservatee and Trusts:

The conservatee:

a. ☐ is ☐ is not a trustor or settlor of a trust.

b. ☐ is ☐ is not a beneficiary of a trust.

If you selected "Is" to complete any of the above statements, identify and provide, in an attachment to this *Request*, the current address and telephone number of the current trustee(s) of each trust, describe the general terms of and value of each trust and the nature and value of the conservatee's interest in each trust, and the amount(s) and frequency of any distributions to or for the benefit of the conservatee prior to your appointment as conservator of which you are aware. *(You may use Judicial Council form MC-025 for this purpose.)*

All applicants who checked item 8b or item 8c on page 2 must continue to and follow the instructions for completion of items 14–16 or items 14–18 on page 4, before signing below.

The information I have provided on this form and all attachments about the (proposed) ward or conservatee is true and correct to the best of my information and belief. The information I have provided on this form and all attachments concerning myself is true and correct. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: _____

_____ ▶ _____

Print your name here *Sign here*

Name of (Proposed) Ward or Conservatee: _____

Case Number:

*If you checked 8a on page 2, do not fill out below. If you checked 8b, you **must** answer questions 14–16. If you checked 8c, you **must** answer questions 14–18. If you need more space, attach form MC-025 or attach a sheet of paper, and write "Financial Information" and the ward's or conservatee's name and case number at the top.*

14 ☐ Check here if the ward's or conservatee's income changes a lot from month to month. If it does, complete the form based on their average income for the past 12 months.

15 Ward's or Conservatee's Gross Monthly Income

a. List the source and amount of ***any*** income the ward or conservatee gets each month, including: wages or other income from work before deductions, spousal/child support, retirement, social security, disability, unemployment, military basic allowance for quarters (BAQ), veterans payments, dividends, interest, trust income, annuities, net business or rental income, reimbursement for job-related expenses, gambling or lottery winnings, etc.

(1) _____ $ _____
(2) _____ $ _____
(3) _____ $ _____
(4) _____ $ _____
(5) _____ $ _____

b. **Total monthly income:** $ _____

16 Ward's or Conservatee's Household's Income

a. List the income of all other persons living in the ward's or conservatee's home who depend in whole or in part on them for support, or on whom they depend in whole or in part for support.

	Name	Age	Relationship	Gross Monthly Income
(1)				$
(2)				$
(3)				$
(4)				$
(5)				$
(6)				$
(7)				$
(8)				$
(9)				$
(10)				$

b. **Total monthly income of persons above:** $ _____

Total monthly income *and* household income *(15b plus 16b):* $ _____

To list any other facts you want the court to know, such as the (proposed) ward's or conservatee's unusual medical expenses, etc, attach form MC-025 or attach a sheet of paper and write "Financial Information" and the (proposed) ward's or conservatee's name and case number at the top.

Check here if you attach another page. ☐

Important! **If the ward's or conservatee's financial situation or ability to pay court fees improves, you must notify the court within five days on form FW-010-GC.**

Do not include income of guardian or conservator living in the household in item 16, their money and property in item 17, or their deductions and expenses in item 18 unless they are a parent of the ward or the spouse or registered domestic partner of the conservatee.

17 Ward's or Conservatee's Household's Money and Property

a. Cash $ _____

b. All financial accounts *(list bank name and amount):*
(1) _____ $ _____
(2) _____ $ _____
(3) _____ $ _____

c. Cars, boats, and other vehicles

	Make / Year	Fair Market Value	How Much You Still Owe
(1)		$	$
(2)		$	$
(3)		$	$

d. Real estate

	Address	Fair Market Value	How Much You Still Owe
(1)		$	$
(2)		$	$

e. Other personal property (jewelry, furniture, furs, stocks, bonds, etc.):

	Describe	Fair Market Value	How Much You Still Owe
(1)		$	$
(2)		$	$

18 Ward's or Conservatee's Household's Monthly Deductions and Expenses

a. List any payroll deductions and the monthly amount below:
(1) _____ $ _____
(2) _____ $ _____
(3) _____ $ _____
(4) _____ $ _____

b. Rent or house payment and maintenance $ _____
c. Food and household supplies $ _____
d. Utilities and telephone $ _____
e. Clothing $ _____
f. Laundry and cleaning $ _____
g. Medical and dental expenses $ _____
h. Insurance (life, health, accident, etc.) $ _____
i. School, child care $ _____
j. Child, spousal support (another marriage) $ _____
k. Transportation, gas, auto repair and insurance $ _____
l. Installment payments *(list each below):*
Paid to:
(1) _____ $ _____
(2) _____ $ _____
(3) _____ $ _____
m. Wages/earnings withheld by court order $ _____
n. Any other monthly expenses *(list each below)*.
Paid to: How Much?
(1) _____ $ _____
(2) _____ $ _____
(3) _____ $ _____

Total monthly expenses *(add 18a –18n above):* $ _____

FW-003-GC **Order on Court Fee Waiver (Superior Court) (Ward or Conservatee)**

Clerk stamps date here when form is filed.

1 (Proposed) guardian or conservator who asked the court to waive court fees for (proposed) ward or conservatee:

Name: _____

Street or mailing address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

2 Lawyer, if person in 1 has one:

Name: **Self-Represented** State Bar No: _____

Firm or Affiliation: _____

Street or mailing address: _____

City: _____ State: ____ Zip: _____

E-mail: _____ Telephone: _____

3 (Proposed) ward or conservatee:

Name: _____

Street or mailing address: _____

City: _____ State: ____ Zip: _____

Telephone: _____

4 Lawyer for (proposed) ward or conservatee, if any:

Name: **Self-Represented** State Bar No: _____

Firm or Affiliation: _____

Street or mailing address: _____

City: _____ State: ____ Zip: _____

E-mail: _____ Telephone: _____

Fill in court name and street address:

Superior Court of California, County of Santa Clara
Street: 191 N. First Street
Mial: 191 N. FIrst Street
San Jose, CA 95113

Fill in case number and name:

Case Number:

Case Name:

5 A request to waive court fees was filed on *(date):* _____

☐ The court made a previous fee waiver order in this case on *(date):*

Read this form carefully. All checked boxes ☒ are court orders.

Notice: The court may order you to answer questions about the ward's or conservatee's finances after granting a waiver and may later order payment of the waived fees from his or her estate. If this happens and the fees are not paid, the court can also charge collection fees. The court may also direct you to make efforts to collect money to pay back waived fees from persons who owe a duty to support the ward or conservatee. If there is a change in the ward's or conservatee's financial circumstances during this case that increases his or her ability to pay fees and costs, you must notify the trial court within five days. (Use form FW-010-GC.)

If this case is an action against another party and you win the case on behalf of the ward or conservatee, the trial court may order the other side to pay some or all of the waived fees. If you settle the matter for **$10,000** or more, the trial court will have a lien on the settlement in the amount of the waived fees. The trial court may not dismiss the case until the lien is paid.

The court may also have a lien against the ward's or conservatee's estate that must be paid before the estate is distributed, the guardianship or conservatorship proceeding is concluded, and you are discharged as guardian or conservator.

6 After reviewing your: ☒ *Request to Waive Court Fees* ☐ *Request to Waive Additional Court Fees*

the court makes the following orders:

a. ☐ The court **grant**s your request concerning the ward's or conservatee's court fees and costs, as follows:

(1) ☐ **Fee Waiver.** The court grants your request and waives the fees and costs listed below. *(Cal. Rules of Court, rules 3.55 and 8.818.)* You do not have to pay the court fees for the following:

- Filing papers in superior court
- Making copies and certifying copies
- Sheriff's fee to give notice
- Court fee for phone hearing
- Giving notice and certificates
- Sending papers to another court department

(List continued on next page.)

Name of (Proposed) Ward or Conservatee: _____

Case Number:

6 a. (1)
- Reporter's fee for attendance at hearing or trial, if you request that the court provide an official reporter
- Assessment for court investigations under Probate Code section 1513, 1826, or 1851
- Preparing, certifying, copying, and sending the clerk's transcript on appeal
- Holding in trust the deposit for a reporter's transcript on appeal under rule 8.130 or 8.834
- Making a transcript or copy of an official electronic recording under rule 8.835

(2) ☐ **Additional Fee Waiver.** The court grants your request and waives the additional superior court fees and costs that are checked below. *(Cal. Rules of Court, rule 3.56.)* You do not have to pay for the checked items.

☐ Jury fees and expenses
☐ Fees for court-appointed experts
☐ Fees for a peace officer to testify in court
☐ Court-appointed interpreter fees for a witness
☐ Other *(specify)*: _____

b. ☐ The court **denies** your fee waiver request, as follows:

Warning! If you miss the deadline below, the court cannot process your request for hearing or the court papers you filed with your original request. If the papers were a notice of appeal, the appeal may be dismissed.

(1) ☐ The court **denies** your request because it is incomplete. You have **10 days** after the clerk gives notice of this order (see date of service on next page) to:
- Pay the ward's or conservatee's fees and costs, or
- File a new revised request that includes the items listed: ☐ Below ☐ On Attachment 6b(1)

_____
_____
_____

(2) ☐ The court **denies** your request because the information you provided on the request shows that the ward or conservatee is not eligible for the fee waiver for the reasons specified:
☐ Below ☐ On Attachment 6b(2)

_____
_____
_____

The court has enclosed a blank *Request for Hearing About Court Fee Waiver Order (Ward or Conservatee)(Superior Court)* (form FW-006-GC). You have **10 days** after the clerk gives notice of this order (see date of service on next page) to:
- Pay the fees and costs in full or the amount listed in c below, or
- Ask for a hearing in order to show the court more information. *(Use form FW-006-GC to request hearing.)*

c. (1) ☐ The court needs more information to decide whether to grant your request. You must go to court on the date on page 3. The hearing will be about questions regarding your eligibility specified:
☐ Below ☐ On Attachment 6c(1)

_____
_____
_____

(2) ☐ Bring the items of proof to support your request, if reasonably available, that are listed:
☐ Below ☐ On Attachment 6c(2)

_____
_____
_____

Name of (Proposed) Ward or Conservatee: _____

Case Number:

Warning! If item c is checked, and you do not go to court on your hearing date, the judge will deny your request to waive court fees, and you will have 10 days to pay the ward's or conservatee's fees. If you miss that deadline, the court cannot process the court papers you filed with your request. If the papers were a notice of appeal, the appeal may be dismissed.

NOTE TO GUARDIAN or CONSERVATOR: If there are unpaid court fees after a denial of a request for a fee waiver, your case—including the guardianship or conservatorship proceeding if the waiver is requested in that matter—might not go forward. After a denial, you may choose to advance the court costs yourself to ensure that the case proceeds. If you or another person is appointed as guardian or conservator, you would have an opportunity to be reimbursed for such advances from the assets of the guardianship or conservatorship estate, if any, as allowable expenses of administration. You might also have the right to reimbursement for advanced court costs from persons with an obligation to support the ward or conservatee from assets not part of his or her estate, such as a parent of the ward, the spouse or registered domestic partner of the conservatee who is managing the couple's community property outside the conservatorship estate, or the trustee of a trust of which the conservatee is a beneficiary.

Hearing Date → Date: _____ Time: _____
Dept.: _____ Room: _____

Name and address of court if different from above:
_____
_____
_____
_____
_____

Date: _____

▶ _____
Signature of (check one): ☐ *Judicial Officer* ☐ *Clerk, Deputy*

Request for Accommodations. Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least 5 days before your hearing. Contact the clerk's office for *Request for Accommodation,* Form MC-410. (Civil Code, § 54.8.)

Clerk's Certificate of Service

I certify that I am not involved in this case and *(check one):*

☐ I handed a copy of this Order to the party and attorney, if any, listed in (1) and (2), at the court, on the date below.

☐ This order was mailed first class, postage paid, to the party and attorney, if any, at the addresses listed in (1) and (2), from *(city):* _____, California, on the date below.

☐ A certificate of mailing is attached.

Date: _____

Clerk, by _____, Deputy
Name: _____

This is a Court Order.