

How to ask for a NON-Emergency Guardianship

<input type="checkbox"/> Step 1 Fill out forms	<p>Use blue or black ink to complete the following forms:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> (GC-210(P)) Petition for Appointment of Guardian of the Person <input checked="" type="checkbox"/> (GC-210(CA)) Guardianship Petition-Child Information Attachment (One for EACH child in the case) <input checked="" type="checkbox"/> (FL-105) Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) <input type="checkbox"/> (Pleading) Request to Dispense with Notice <input type="checkbox"/> (GC-211) Consent of Proposed Guardian, Nomination of Guardian and Waiver of Notice <input checked="" type="checkbox"/> (GC-020) Notice of Hearing and attachments <input checked="" type="checkbox"/> (GC-240) Order Appointing Guardian of Minor <input checked="" type="checkbox"/> (GC-250) Letters of Guardianship <input checked="" type="checkbox"/> (GC-212) Confidential Guardian Screening Form (One for EACH Proposed Guardian) <input checked="" type="checkbox"/> (PB-4014) Authorization for Release of Information <input checked="" type="checkbox"/> (GC-248) Duties of Guardian <input checked="" type="checkbox"/> (PB-4005) Referral for Court Investigator & Questionnaire – Guardianship <input checked="" type="checkbox"/> (FW-001-GC) Request to Waive Court Fees (One for EACH child in the case) <input checked="" type="checkbox"/> (FW-003-GC) Order on Court Fee Waiver (One for EACH child in the case)
<input type="checkbox"/> Step 2	<p>Make 2 copies, in addition to the original.</p>
<input type="checkbox"/> Step 3 File original & copies There is a filing fee <i>unless the fee is waived.</i>	<p>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.</p> <ul style="list-style-type: none"> <input type="checkbox"/> If you are not asking for a fee waiver, you will pay the filing fee and get file-stamped copies back when you file. <input type="checkbox"/> 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.
<input type="checkbox"/> Step 4 Serve Copies “ Personal Service ” means someone, NOT YOU, who is at least 18 years old must hand deliver your forms then sign the proof of service form. “ Mail Service ” means someone, NOT YOU, who is at least 18 years old must mail forms then sign the proof of service form.	<p>After the filed copies are returned to you, keep 1 copy for you and serve 1 Filed Copy of: <u>GC-210 (P)</u>, <u>GC-210(CA)</u>, <u>GC-020</u> (DO NOT serve the confidential forms).</p> <p>These forms must be PERSONALLY SERVED (hand-delivered) by any adult (not you) onto each of the following people: <input type="checkbox"/> mother, <input type="checkbox"/> father, <input type="checkbox"/> current guardian (if there is one), and the <input type="checkbox"/> child (if they are 12 or older).</p> <p>Deadline for serving IS 15 days BEFORE the hearing.</p> <hr/> <p>The law says that the following people must be served by MAIL by any adult (not you) with the forms above to:</p> <p>all <input type="checkbox"/> grandparents, <input type="checkbox"/> (half-)brothers, and <input type="checkbox"/> (half-)sisters (from either parent) if they are 12 or older, and <input type="checkbox"/> Program Director, Emergency Response Services, 333 West Julian Street, 2nd Floor, San Jose, CA 95110.</p> <hr/> <p>If you are not related to the child by blood, marriage or adoption, that the following people must be served by MAIL by any adult (not you) with the forms above to:</p> <ul style="list-style-type: none"> <input type="checkbox"/> The California Department of Social Services, Director of Social Services, 744 P Street, Sacramento, CA 95814 and the <input type="checkbox"/> Social Services Agency, Dept. of Family and Children’s Services at 333 W. Julian St. San Jose, CA 95110. <p>After papers are delivered,</p>

<input type="checkbox"/> Step 4 (continued)	<input type="checkbox"/> Personal Service The server (person who hand delivers the papers) must complete the <i>Proof of Personal Service of Notice of Hearing</i> (GC-020(P)) attached to your copy of the <i>Notice of Hearing</i> . <input type="checkbox"/> Mail Service: If the papers were mailed, the server must complete the back side of the <i>Notice of Hearing</i> (GC-020). <input type="checkbox"/> File: Take the Proof of Service forms back to the courthouse to file it at least 5 days before the court hearing . There is no fee to file this form. Keep a copy for yourself. <input type="checkbox"/> If you cannot find some or all of the people who must be served , write down everything you've done to try to find them, <i>in detail</i> . Put this information on the <i>Request to Dispense with Notice</i> form in your packet. At your Court hearing you will need to explain how you have looked for them (example – “I called their mother and she said...” and “I did a search on the internet and I found...”, “I went to their last job and talked to their boss and he said...”, etc. <input type="checkbox"/> If any of the people who must be served are willing to waive service and consent to the guardianship, they may sign the Consent of Proposed Guardian, Nomination, and Waiver of Notice (GC-211) . Whoever signs this form <u>does not need to be served</u> with the guardianship forms. You must file this form with the signatures at least 5 days before the court date .
<input type="checkbox"/> 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. If you need help speaking English, please bring an interpreter to your hearing as well.

WHAT IS A GUARDIANSHIP?

The type of guardianship referred to in this instruction sheet is 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 hearing date or two, which is 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 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

Non-Emergency Guardianship

Please complete the following forms in blue or blank ink.

Updated 7/12/2023

GC-210(P)**Petition for Appointment of Guardian of the Person**Guardianship of the person of (all children's names):

Clerk stamps date here when form is filed.

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.)

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.**

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.: _____

Guardianship of the person of (all children's names): 	Case Number:
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- 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 <i>(all children's names)</i> :	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 <i>(all children's names)</i> :	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

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
<input type="checkbox"/> TANF (Temporary Asst. for Needy Families)	\$ _____	<input type="checkbox"/> Other (<i>explain</i>):	\$ _____
<input type="checkbox"/> Social Security	\$ _____	<input type="checkbox"/> Other (<i>explain</i>):	\$ _____
<input type="checkbox"/> 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): _____



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	_____	_____
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 nomination 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 (specify 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.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): <hr/> (Your Legal First and Last Name) <hr/> (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	
(This section applies only to family law cases.) PETITIONER: RESPONDENT: OTHER PARTY:	
(This section applies only to guardianship cases.) GUARDIANSHIP OF (Name): _____ Minor	CASE NUMBER: _____
DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)	

1. **I am a party** to this proceeding to determine custody of a child.
2. My present address and the present address of each child residing with me is confidential under Family Code section 3429 as I have indicated in item 3.
3. There are (specify number): _____ minor children who are subject to this proceeding, as follows:
(Insert the information requested below. The residence information must be given for the last FIVE years.)

a. Child's name	Place of birth	Date of birth	Sex
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with (name and complete current address) <input type="checkbox"/> Confidential	Relationship
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
b. Child's name	Place of birth	Date of birth	Sex
<input type="checkbox"/> Residence information is the same as given above for child a. (If NOT the same, provide the information below.)			
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with (name and complete current address) <input type="checkbox"/> Confidential	Relationship
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
to	Child's residence (City, State)	Person child lived with (name and complete current address)	

- c. Additional residence information for a child listed in item a or b is continued on attachment 3c.
- d. Additional children are listed on form FL-105(A)/GC-120(A). (Provide all requested information for additional children.)

SHORT TITLE: Guardianship of:	CASE NUMBER:
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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, location)	Court order or judgment (date)	Name of each child	Your connection to the case	Case status
a. <input type="checkbox"/> Family						
b. <input type="checkbox"/> Guardianship						
c. <input type="checkbox"/> Other						

Proceeding	Case Number	Court (name, state, location)
d. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency		
e. <input type="checkbox"/> 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	Case number (if known)	Orders expire (date)
a. <input type="checkbox"/> Criminal				
b. <input type="checkbox"/> Family				
c. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency				
d. <input type="checkbox"/> Other				

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

a. Name and address of person <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child	b. Name and address of person <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child	c. Name and address of person <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child
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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 OF DECLARANT)

7. Number of pages attached: _____

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.

Request to Dispense with Notice

Fill out the next page if you want to ask the judge to excuse you from having to serve paperwork on the following:

1. Child(ren) in this application (if they are 12 or older)
2. Minor(s)'s parents
3. Minor(s)'s maternal/paternal grandparents
4. Any other person with a visitation order for the minor(s)

FOR EXAMPLE:

The above people are deceased.
The above people cannot be found.

You would need to explain on next page what things you have done to try to locate that person.

ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME AND ADDRESS): <hr/> <p style="text-align: center;">(Your Full Legal Name)</p> <hr/> <p>(Your Street Address) (Apt #) (City) (Zip)</p>	TELEPHONE NO.: <hr/> <p style="text-align: center;">(Phone Number)</p>	<i>FOR COURT USE ONLY</i>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA STREET ADDRESS: 201 North First Street, San José, CA 95113 MAILING ADDRESS: 191 North First Street CITY AND ZIP CODE: San José, California 95113 BRANCH NAME: Family Justice Center Courthouse		
IN THE MATTER OF:		
REQUEST TO DISPENSE WITH NOTICE		CASE NUMBER:

1. I am the minor's parent grandparent other: _____

2. I should not have to give notice to the following people (child – if over 12, parents, grandparents, child's brothers/sisters – over 12 only, or person with court ordered visitation or custody) because I have not been able to find them:

a. Name: _____ Relation to child: _____

This person's last known address is: _____

I last knew of this person living at that address on (date): _____

I have tried to find this person by doing these things:

I cannot get this person's new address because:

b. Name: _____ Relation to child: _____

This person's last known address is: _____

I last knew of this person living at that address on (date): _____

IN THE MATTER OF:	CASE NUMBER:
-------------------	--------------

I have tried to find this person by doing these things:

I cannot get this person's new address because:

c. Name: _____ Relation to child: _____

This person's last known address is: _____

I last knew of this person living at that address on (date): _____

I have tried to find this person by doing these things:

I cannot get this person's new address because:

3. Check here if you need more space. Label a piece of paper "Request to Dispense with Notice – Attachment 2" and write the additional information on it.

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

Date: _____

My Signature: _____

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address) : <hr/> <p style="text-align: center;">(Your Full Legal Name)</p> <hr/> <p>(Your Street Address) (Apt #) (City) (Zip)</p> 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 OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (Name) :	
<input type="checkbox"/> CONSENT OF PROPOSED GUARDIAN <input type="checkbox"/> NOMINATION OF GUARDIAN <input type="checkbox"/> 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.

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 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.)

<input checked="" type="checkbox"/> GUARDIANSHIP	<input type="checkbox"/> CONSERVATORSHIP	OF THE	<input checked="" type="checkbox"/> PERSON	<input type="checkbox"/> ESTATE	CASE NUMBER:
OF (Name):					
<input checked="" type="checkbox"/> MINOR					<input type="checkbox"/> (PROPOSED) CONSERVATEE

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 (<i>number, street, city, state, and zip code</i>)
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.*)



<input checked="" type="checkbox"/> GUARDIANSHIP <input type="checkbox"/> CONSERVATORSHIP OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (Name) : _____	CASE NUMBER: _____
<input checked="" type="checkbox"/> MINOR <input type="checkbox"/> (PROPOSED) CONSERVATEE	

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

	<u>Name</u>	<u>Address where served (number, street, city, and state)</u>	<u>Date and time service made</u>
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)

<input checked="" type="checkbox"/> GUARDIANSHIP <input type="checkbox"/> CONSERVATORSHIP OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (Name) :	CASE NUMBER:
<input checked="" type="checkbox"/> MINOR <input type="checkbox"/> (PROPOSED) CONSERVATEE	

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

	<u>Name</u>	<u>Address where served (number, street, city, and state)</u>	<u>Date and time service made</u>
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.

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

Date:

Date:

(SIGNATURE)

(SIGNATURE)

ATTORNEY OR PARTY WITHOUT ATTORNEY NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: 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 OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> 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 Drew Takaichi**

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.

Page 1 of 3

GUARDIANSHIP OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (name):	CASE NUMBER:
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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 <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF <i>(name):</i>	CASE NUMBER:
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- 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 NAME: FIRM NAME: STREET ADDRESS: CITY: TELEPHONE NO.: E-MAIL ADDRESS: ATTORNEY FOR (name): Self-Represented	STATE BAR NO.: STATE: ZIP CODE: FAX NO.:	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 OF (name):		
LETTERS OF GUARDIANSHIP <input checked="" type="checkbox"/> Person <input type="checkbox"/> 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:
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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

LETTERS OF GUARDIANSHIP
(Probate-Guardianships and Conservatorships)

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

FOR COURT USE ONLY

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

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:

CONFIDENTIAL (DO NOT ATTACH TO PETITION)

GC-212

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 OF (Name) : _____ MINOR		CASE NUMBER:	
CONFIDENTIAL GUARDIAN SCREENING FORM Guardianship of <input checked="" type="checkbox"/> Person <input type="checkbox"/> 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.

- Proposed guardian (name):**
 - Date of birth:
 - Social security number:
 - Driver's license number: _____ State: _____
 - Telephone numbers: Home: _____ Work: _____ Other: _____
- 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.)
- 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.)
- 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.)
- 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.)
- 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.)
- 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.)
- 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.)
- 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.)

Page 1 of 2

GUARDIANSHIP OF (Name): <div style="text-align: right;">MINOR</div>	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:
Home telephone: | School (name):
School telephone: | Other telephone: |
| 21. Minor's name:
Home telephone: | School (name):
School telephone: | Other telephone: |
| 22. Minor's name:
Home telephone: | School (name):
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.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address): <hr style="border: 0.5px solid black;"/> <p style="text-align: center;">(Your Full Legal Name)</p> <hr style="border: 0.5px solid black;"/> <p>(Your Street Address) (Apt #) (City) (Zip)</p> 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 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) : _____ (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	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 OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> 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)

**DUTIES OF GUARDIAN
(Probate)**

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)

DUTIES OF GUARDIAN
(Probate)

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)

DUTIES OF GUARDIAN
(Probate)

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 account 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)

DUTIES OF GUARDIAN
(Probate)

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)

For Court use only:

Temp hrg date:

Perm hrg date:

REFERRAL FOR COURT INVESTIGATOR & QUESTIONNAIRE - GUARDIANSHIP

Case Number (if you have one) :

Guardianship

~~Conservatorship~~ 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 child(ren) in this case? Yes No

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

Are there any custody orders about the child(ren) in this case? Yes No

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

Information about the CHILD(REN)

- Child ① Name:
- Birth Date:
- Social Security Number:
- School, Grade, School Telephone Number:

- Child ② Name:
- Birth Date:
- Social Security Number:
- School, Grade, School Telephone Number:

- Child ③ 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.

CONFIDENTIAL - DO NOT PUT IN COURT FILE

REFERRAL FOR COURT INVESTIGATOR & QUESTIONNAIRE - GUARDIANSHIP (PROBATE)

Information about the PROPOSED GUARDIAN'S ATTORNEY

Proposed ~~Counselor~~ **Guardian** doesn't have an attorney

Name:

Address:

Phone Number:

Fax Number:

Information about the PROPOSED GUARDIAN(S)

Proposed Guardian ① :

- Name:
- 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 ② :

- Name:
- 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:

CONFIDENTIAL - DO NOT PUT IN COURT FILE

**REFERRAL FOR COURT INVESTIGATOR & QUESTIONNAIRE - GUARDIANSHIP
(PROBATE)**

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

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

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

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

- **Name:**
- **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.



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 his or her support, is a low-income person, or does not have enough income to pay for his or her 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, his or her 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 his or her estate, any collection costs.

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:****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):
Minor's income is zero

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	\$2,430.00	3	\$4,143.34	5	\$5,856.67
2	\$3,286.67	4	\$5,000.00	6	\$6,713.34

If more than 6 people at home, add \$856.67 for each extra person.

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 him or her in family size in 8b. unless he or she is 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 father: _____ Deceased (date of death): _____

Street or mailing address: _____

City: _____ State: _____ Zip: _____

Phone: _____

b. Name of ward's mother: _____ 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 his or her 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 him or her for support, or on whom he or she depends in whole or in part for support.

Table with columns: Name, Age, Relationship, Gross Monthly Income. Rows 1-10.

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, his or her money and property in item 17, or his or her deductions and expenses in item 18 unless he or she is 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. Table with columns: Make / Year, Fair Market Value, How Much You Still Owe. Rows 1-3.

d. Real estate. Table with columns: Address, Fair Market Value, How Much You Still Owe. Rows 1-2.

e. Other personal property (jewelry, furniture, furs, stocks, bonds, etc.): Table with columns: Describe, Fair Market Value, How Much You Still Owe. Rows 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): \$

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: _____

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

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

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: Guardianship of:

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

(*List continued on next page.*)



- 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.

- | | |
|---|---|
| <input type="checkbox"/> Jury fees and expenses | <input type="checkbox"/> Fees for a peace officer to testify in court |
| <input type="checkbox"/> Fees for court-appointed experts | <input type="checkbox"/> Court-appointed interpreter fees for a witness |
| <input type="checkbox"/> Other (<i>specify</i>): _____ | |

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.

	→ 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.