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PET

Name

Address

City, State, Zip Code

Telephone number

IN PROPER PERSON

IN THE 8TH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
IN AND FOR THE COUNTY OF CLARK

In the Matter of the Guardianship of the:)

Person)

Estate)

Person and Estate)

of:)

Case No. _____

Dept. No. _____

_____)

A Minor.)

PETITION FOR APPOINTMENT OF GUARDIANS

COMES NOW, Petitioner (*proposed guardian's name*) _____

_____ and Co-Petitioner (*proposed co-guardian's name; if only one guardian, write "N/A"*) _____, in accordance

with Chapter 159 of the Nevada Revised Statutes, whose petition respectfully represents the following to this Honorable Court:

Information Regarding the Petitioner

1. That the Petitioner would like to be appointed the general Guardian over
(*proposed ward's full legal name*) _____.

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

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3. That the Petitioner currently resides at (*street/city/state/zip*): _____

The above address is the same as the mailing address.

The mailing address is (*street/city/state/zip*): _____

4. That the Petitioner's date of birth is _____.

5. That the Petitioner is a resident of the State of _____.

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

7. (**Check the boxes that best describe the petitioner**)

That the Petitioner has never been convicted of a felony.

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

_____ and (**check one**) was was not placed on parole and (**check one**) was was not placed on probation for that felony. Proof of disposition will be filed with this Petition.

8. That the Petitioner (**check one**) has has not been suspended for misconduct or disbarred from the practice of law, the practice of accounting or any other profession which involves the management or sale of money, investments, securities or real property and requires licensure in Nevada or any other state.

9. That the Petitioner (**check one**) has has not filed for bankruptcy within the past 7 years.

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10. That the Petitioner is the *(relationship to ward)* _____
of the proposed Ward. Petitioner is competent and capable of acting as Guardian of the **(check one)** person only estate only person and estate of the above ward, and hereby consents to act in this capacity.

11. If Petitioner is requesting a guardianship over the proposed Ward’s estate, a copy of **Exhibit A: Information Regarding the Proposed Ward’s Estate** is attached hereto.

12. **(Check the box that best describes the petitioner)**

That the Petitioner is not a private professional guardian and is not currently receiving compensation for services as a guardian to more than one ward who is not related to him/her by blood or marriage.

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

Information Regarding the Co-Petitioner

13. That the Co-Petitioner would like to be appointed the general Guardian over *(proposed ward’s full legal name)* _____.

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

15. That the Co-Petitioner currently resides at *(street/city/state/zip)*: _____.

The above address is the same as the mailing address.

1 The mailing address is (*street/city/state/zip*): _____

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5 16. That the Co-Petitioner's date of birth is _____.

6 17. That the Co-Petitioner is a resident of the State of _____.

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

9
10 19. **(Check the boxes that best describe the co-petitioner)**

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

12 That the Co-Petitioner has been convicted of a felony (*description of conviction*)

13 _____ and (**check**
14 **one**) was was not placed on parole and (**check one**) was was not placed on
15 probation for that felony. Proof of disposition will be filed with this Petition.

16
17 20. That the Co-Petitioner (**check one**) has has not been suspended for
18 misconduct or disbarred from the practice of law, the practice of accounting or any other
19 profession which involves the management or sale of money, investments, securities or real
20 property and requires licensure in Nevada or any other state.

21
22 21. That the Co-Petitioner (**check one**) has has not filed for bankruptcy
23 within the past 7 years.

24 22. That the Co-Petitioner is the (*relationship to ward*) _____
25 of the proposed Ward. Co-Petitioner is competent and capable of acting as Co-Guardian of the
26 (**check one**) person only estate only person and estate of the above ward, and hereby
27 consents to act in this capacity.
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23. If Co-Petitioner is requesting a guardianship over the proposed Ward's estate, a copy of **Exhibit A**: Information Regarding the Proposed Ward's Estate is attached hereto.

24. **(Check the box that best describes the co-petitioner)**

That the Co-Petitioner is not a private professional guardian and is not currently receiving compensation for services as a guardian to more than one ward who is not related to him/her by blood or marriage.

That the Co-Petitioner is a private professional guardian. (*Copies of documents proving that proposed guardian meets the requirements of a "private professional guardian" will be filed with this Petition.*)

Information Regarding the Proposed Ward

25. That the proposed Ward, *(proposed ward's name)* _____, age _____, was born on *(date of birth)* _____.
The proposed Ward will become 18 years of age on *(date)* _____.

26. That the proposed Ward currently resides at *(street/city/state/zip)*: _____.

- The above address is the same as the mailing address.
- The mailing address is *(street/city/state/zip)*: _____.

27. That the proposed Ward has been a resident of the State of _____ for _____ days _____ months _____ years and has lived at the above address for _____ days _____ months _____ years.

1 28. The name and address of any person or care provider having the care and control
2 of the proposed Ward is *(name/address of care provider)* _____
3

4 _____
5 _____
6 The current care provider has had care of the proposed Ward because: _____
7 _____
8 _____
9

10 29. That the proposed Ward's parent or legal guardian has has not executed a
11 written nomination of guardian. The agent is _____.

12 30. **(Check one of the following)**

13 There is not a current order concerning custody of the proposed Ward.

14 There is a current order concerning custody of the proposed Ward. The order is
15 from the State of _____ and was filed on *(date)* _____.
16

17 If the order was not registered with this Court, a copy of the order will be filed with this Petition.

18 31. Petitioners **(check one)** do do not believe that the proposed Ward will
19 need a guardianship when he/she becomes 18 years of age.

20 32. **(Check one of the following)**

21 The guardianship **is NOT requested** because of an investigation conducted by
22 Child Protective Services (CPS) or other similar agency pursuant to Chapter 432B of the Nevada
23 Revised Statutes.

24 The guardianship **is requested** because of an investigation conducted by Child
25 Protective Services (CPS) or other similar agency pursuant to Chapter 432B of the Nevada
26 Revised Statutes. The name of the case worker is _____
27

28 The juvenile case file number is _____. The investigating agency

1 **(check one)** does does not approve of this guardianship and the placement of the
2 proposed Ward with the proposed Guardians.

3 **Information Regarding the Proposed Ward's Mother**

4
5 33. That the proposed Ward's mother's full legal name is: _____
6

7 34. That the proposed Ward's mother currently lives at (*street/city/state/zip*) _____
8

9 The above address is the same as the mailing address.
10

11 The mailing address is (*street/city/state/zip*): _____
12

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14 35. That the proposed Ward's mother is unable to care for him/her because _____
15
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19 **Information Regarding the Proposed Ward's Father**

20 36. **(Check one of the following)**

21 That the father of the proposed Ward is truly unknown, there is no father listed on
22 the proposed Ward's birth certificate, there has never been a court order regarding child support,
23 custody, or a finding of paternity.
24

25 That the father of the proposed Ward is deceased. A copy of the father's death
26 certificate is attached to this Petition.
27

28 That the father's parental rights over the proposed Ward have been terminated by
a court order. A copy of the order is attached to this Petition.

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That the father of the proposed Ward is known. The father's full legal name is _____.

37. The father currently or was last known to live at (*street/city/state/zip*) _____

38. The proposed Ward's father is unable to care for him/her because _____

GENERAL INFORMATION

39. That a general guardianship is needed for the proposed Ward because (*explain in detail*): _____

40. The following documentation is attached to this Petition showing the need for a guardianship over the proposed Ward: **(Check all that apply)**

A letter signed by any governmental agency in this State which conducts investigations; or

A certificate signed by any other person whom the court finds qualified to execute a certificate.

Other: _____

///

1 41. That the proposed Ward (**check one**) is is not a party to any pending
2 criminal or civil lawsuit and that the guardianship (**check one**) is is not sought for the
3 purpose of initiating a lawsuit.
4

5 42. The names and addresses of the relatives within the second degree of
6 consanguinity to the Wards is/are included on **Exhibit B** attached to the Petition. *(If a relative is*
7 *deceased, write his/her name and write “deceased” in the address box. If the relative’s*
8 *whereabouts are unknown, write his/her name and write “unknown” in the address box.)*
9

10 The second degree of consanguinity for a **minor** includes the following relatives:
11 Proposed Ward (age 14 or older) Siblings (age 14 or older)
12 Mother Maternal grandparents (mother’s side)
13 Father Paternal grandparents (father’s side)
14 Legal guardian (if any)

15 43. That a copy of the following forms of identification will be filed in a separate
16 document: (**check all that apply for the petitioner, co-petitioner, and the proposed ward.**

17 **You must provide at least one form of identification for each person.)**

18 For the Petitioner: Social Security Number/ Taxpayer Identification
19 Number/ Valid Drivers License Number/ Valid Identification Card Number/ Valid
20 Passport Number.

21 For the Co-Petitioner: Social Security Number/ Taxpayer Identification
22 Number/ Valid Drivers License Number/ Valid Identification Card Number/ Valid
23 Passport Number.

24 For the Proposed Ward: Social Security Number/ Taxpayer Identification
25 Number/ Valid Drivers License Number/ Valid Identification Card Number/ Valid
26 Passport Number.
27

28 44. That the Petitioner (**check one**) has has not been appointed as Guardian
over the proposed Ward in a state other than Nevada. If Petitioner has been appointed Guardian

1 over the proposed Ward in another state, Petitioner will file with this Court an exemplified copy
2 of the guardianship order and letters of guardianship.

3 45. That the Co-Petitioner (**check one**) has has not been appointed as
4 Guardian over the proposed Ward in a state other than Nevada. If Petitioner has been appointed
5 Guardian over the proposed Ward in another state, Petitioner will file with this Court an
6 exemplified copy of the guardianship order and letters of guardianship.
7

8 WHEREFORE, Petitioner prays that this general guardianship be granted and for such
9 other and further relief as the Court may deem just and proper.
10

11 DATED this ____ day of _____, 20__.

12
13 _____
(Signature)

14 _____
(Printed Name)

15
16 _____
(Signature)

17 _____
(Printed Name)

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VERIFICATION

I, *(name of petitioner)* _____, declare that I am the Petitioner in the within action; that I have read the foregoing Petition For Appointment of Guardians and know the contents thereof; that the same is true of my knowledge except as to those matters therein stated upon information and belief and as to those matters, I believe them to be true.

I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.

PETITIONER

VERIFICATION

I, *(name of petitioner)* _____, declare that I am the Co-Petitioner in the within action; that I have read the foregoing Petition For Appointment of Guardians and know the contents thereof; that the same is true of my knowledge except as to those matters therein stated upon information and belief and as to those matters, I believe them to be true.

I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.

CO-PETITIONER

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EXHIBIT A: Information Regarding the Proposed Ward's Estate

Complete this Exhibit only if you are requesting guardianship over the proposed ward's estate.

1. The proposed ward **(check all that apply)**

- Has no assets or income
- Has assets and income
- Is entitled or will be entitled to assets or income

2. The ward's assets and/or income are **(Include all Social Security, inheritances, pensions, investment/checking/savings accounts, real estate, vehicles, etc. If none, write "N/A". If there are an insufficient number of lines below, write "SEE ATTACHED" on line "d" and attach a page containing the additional assets. NOTE: Information regarding the ward's assets must also be included on the Inventory you file with the Court within 60 days of your appointment.)**

- a. _____ value: \$ _____
- b. _____ value: \$ _____
- c. _____ value: \$ _____
- d. _____ value: \$ _____

3. The funds will be safeguarded by **(check one)**

- Being placed into a blocked account. Proof of Blocked Account must be filed with the Court within 30 days of your appointment as guardians.
- Obtaining a bond which the Petitioners will obtain in an amount equal to the total amount of the liquid assets described above.

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EXHIBIT B

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