

STATE OF NORTH DAKOTA

IN DISTRICT COURT

COUNTY OF _____

_____ JUDICIAL DISTRICT

IN THE MATTER OF THE GUARDIANSHIP OF

AN ALLEGED INCAPACITATED INDIVIDUAL

Case No. _____

PETITION FOR APPOINTMENT OF A GUARDIAN

Name of Proposed Ward:

Age:

Address:

Name of Petitioner(s):

Address:

Corporate or agency status:

Relationship to Proposed Ward:

The Petitioner(s) state(s) to the Court as follows:

1. The information listed above pertaining to the named proposed ward and Petitioner(s) is accurate.

2. The proposed ward is in need of a guardian due to the following reasons:

3. The following person currently has care or custody of the proposed ward:

4. The name and address of the proposed ward's spouse, parents, and adult children are as follows:

5. The known real and personal property, and approximate value if known, of the proposed ward consists of:

6. The proposed ward's income consists of:

7. Name of proposed guardian/co-guardians:

8. Occupation of proposed guardian/co-guardians:

9. Qualifications of proposed guardian/co-guardians:

10. List priority of the proposed guardian/co-guardians:

11. If not first in priority, it is in the best interests of the proposed ward that _____ is/are appointed as guardian/co-guardians because:

12. The Petitioner(s) has/have reviewed possibilities for alternative resource plans as specified by 30.1-26-01, N.D.C.C., and believes that no alternative resource plan is available to the proposed ward for the following reasons:

13. *(Choose and complete one; Paragraph 13 continues on next page):*

Petitioner(s) request(s) that the guardian/co-guardians shall have the degree of authority indicated to make decisions for the proposed ward in the following areas:

<u>Full</u>	<u>Limited</u>	<u>None</u>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Place of Residence
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Education and/or training
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Legal matters
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vocation
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Financial matters
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical treatment
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Access to and control and disposition of safety deposit box and contents.

Petitioner(s) is/are undecided about the extent of authority indicated to make decisions for the proposed ward in the above areas, but request(s) the court consider some degree of authority to make decisions in the following areas:

- Place of Residence
- Education and/or training
- Legal matters
- Vocation
- Financial matters
- Medical treatment
- Access to and control and disposition of safety deposit box and contents.

14. *(Choose and complete one)*

Petitioner(s) **does not (do not) request** that the proposed Ward's rights to vote, to seek to change marital status, to obtain or retain a motor vehicle operator's license, and to use, own, control, or possess a firearm be restricted.

Petitioner(s) **request(s)** that the proposed Ward's rights be restricted as follows (*checkmark the rights you want the Court to restrict*):

- To vote
- To seek to change marital status
- To obtain or retain a motor vehicle operator's license
- To use, own, control, or possess a firearm

15. Name of attorney who last represented the proposed ward:

16. Name and address of any current conservator appointed for the proposed ward:

17. Name and address of any person designated as attorney in fact or agent in a power of attorney or as an agent in a health care directive for the proposed ward:

18. Name and address of any representative payee for the proposed ward:

19. If available, attached is a statement from a physician, mental health services provider or other healthcare provider regarding the physical, neurological, and psychological limitations of the proposed ward.

20. Petitioner(s) has/have considered less intrusive alternatives to guardianship for the proposed ward.

21. The proposed ward (*choose and complete one*):

- Is able to appear physically or by reliable electronic means at the hearing.
- Is not able to appear physically or by reliable electronic means at the hearing because:

22. For the benefit of the proposed ward, the hearing should/should not be held at a place other than the courthouse. If at a place other than the courthouse, explain and propose an alternative location for the hearing:

23. The cost of this proceeding should be paid by:

24. The Petitioner(s) request(s) the following:

- a. A hearing be held promptly on this Petition and that the Court appoint the above-indicated person(s) as guardian/co-guardians for the proposed ward;
- b. The court appoint an expert examiner to examine the proposed ward, and a visitor to interview the proposed ward, proposed guardian/co-guardians, and other persons interested in the welfare of the proposed ward; and
- c. A guardian ad litem be appointed to advocate for the best interests of the proposed ward; and the costs of the guardianship shall be paid for as indicated.

25. The proposed guardian/co-guardians understand(s) that attendance at the hearing on this petition is required unless excused by the court for good cause.

Dated _____.

Signature

Printed Name

Address

City, State, Zip Code

Telephone Number: _____

Email Address: _____

(Use for co-petitioner. If no co-petitioner, write "N/A on signature line.)

Dated _____.

Signature

Printed Name

Address

City, State, Zip Code

Telephone Number: _____

Email Address: _____