

GUARDIANSHIP

For an ADULT

3

**Part 3: Preparing for and Attending the
Court Hearing**

(Forms Packet)

IMPORTANT NOTICE

TRAINING REQUIREMENTS

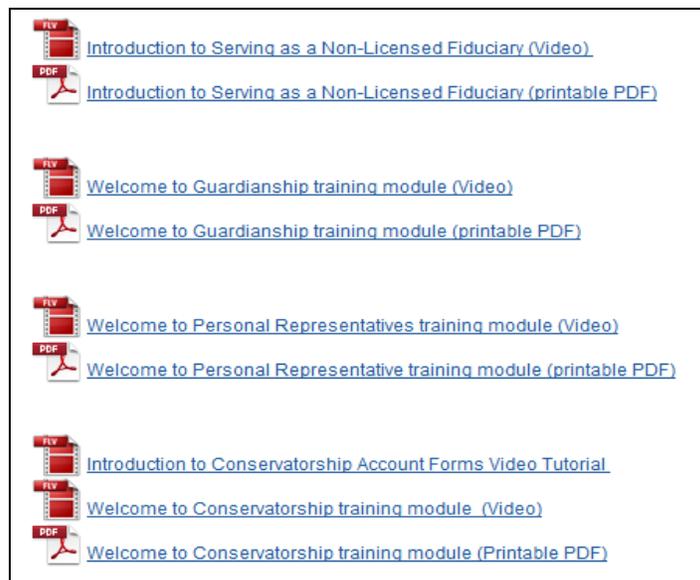
Effective September 1, 2012

The Arizona Supreme Court requires that any person who is not a state-licensed fiduciary (or a financial institution) must complete a training program approved by the Supreme Court **before** Letters of Appointment to serve as a guardian, conservator, or personal representative can be issued by the Clerk of the Court, or within 30 days of a temporary or emergency appointment.

TRAINING SHOULD BE COMPLETED BEFORE THE COURT HEARING
Additional time may be granted for good reason.

You may access and complete the training FREE online at:
www.azcourts.gov/probate/Training.aspx

Go to the section for “**Non-licensed Fiduciaries**” and click on the link to access a narrated slide-show presentation of the materials applicable to your situation.



You may also pick up a printout of the training materials in English or Spanish from the Self-Service Center. AFTER reviewing the materials, you will need to inform the Court that you have completed the training by filing either the Certificate available at the end of the online training, or the Declaration of Completion form available from the Self-Service Center. If you have questions about the training, contact the Probate Clerk at 928-428-3100.

SELF-SERVICE CENTER

**PROCEDURES: PREPARING FOR AND ATTENDING
THE COURT HEARING for PERMANENT APPOINTMENT of a
GUARDIAN for an ADULT
or a person at least 17.5 to become effective at 18**

STEP 1 DOCUMENTS TO PREPARE BEFORE THE COURT HEARING:

A. HEALTH PROFESSIONAL'S REPORT: IF a physician, registered nurse, or psychologist was appointed to examine the proposed protected person, the examiner should have received the "**GUIDELINES FOR HEALTH PROFESSIONAL'S REPORT**" (PBGA15f) and prepared a report on the findings either on the form supplied with the Guidelines, or in any other format that conveys the necessary information.

After the Petitioner receives the examination report*, he or she must:

- Make at least **4 copies** of this report (keep one copy for his/her records), and
- **Mail** a copy of the written report at least **10** business days before the hearing, or hand-deliver a copy at least **5** business days before the hearing, to:
 - 1) The Judge/Commissioner who will hold the hearing;
 - 2) The attorney for the person you say needs the guardian; **AND**
 - 3) The court investigator.

* **Due to concerns about federal patient privacy regulations** some medical professionals may not be willing to turn the report over to you since your appointment as guardian or guardian is not yet final. **If this is the case, the physician or other evaluator may file the report in person or mail it to the Court** (even though the guidelines on the Report form say "Please do not file your report with the Clerk of Court").

B. ORDER TO GUARDIAN (PBGA80f): The person who is to serve as Guardian must **READ AND SIGN** the document called **ORDER TO GUARDIAN**.

READ CAREFULLY! SIGNING THIS DOCUMENT INDICATES THAT YOU UNDERSTAND AND AGREE TO ACCEPT LEGAL RESPONSIBILITY FOR OBEYING THE TERMS OF THIS ORDER.

- The proposed guardian must sign this Order in the **acknowledgement** section to indicate his/her understanding and agreement with the terms of the Order, *and then make 2 copies*. The proposed guardian should *keep* one copy.

C. ORDER OF APPOINTMENT OF PERMANENT GUARDIAN (PBGA81f):

- Complete the caption of the **Order**, which includes the name of the protected person (the Ward) and the case number.
- The Judge/Commissioner will fill in the rest of the Order at the hearing and sign it (the Order) if he or she agrees that a guardian should be appointed.

NOTE: Write the case number on all documents to be presented to the court!

- D. OTHER DOCUMENTS FOR THE JUDGE BEFORE THE HEARING:** In addition to the **3 documents** listed above, you **also** need to **mail or hand-deliver** the following:
- **NOTICE OF HEARING** (PBGC18f),
 - **DECLARATION OF NOTICE PROVIDED** (PBGC29f);
(from packet 2, “**Service of Notice**”) and
 - **WAIVER OF NOTICE** (PBGC19f) (*if applicable*)

Mail or hand-deliver the original *and one copy* of the documents listed in A, B, C, and D above to the Judicial Officer who will conduct the hearing. **If mailing**, it is recommended that you post them **10** full days before the hearing. If delivering in person, do so at least **5 business days** before the hearing.

STEP 2 (Optional) **REQUEST A COURT REPORTER AND/OR INTERPRETER:** If you or the person to be protected, the ward, need an interpreter or a court reporter (someone **you** may hire to make a written record of every word of the hearing), you must inform the staff of the judicial officer who will conduct the hearing, preferably at least **10** days before the hearing but *no later than 2* days before the hearing.

NOTICE: Effective September 1, 2012, The Arizona Supreme Court requires that every person who is to serve as a guardian, a conservator, or a personal representative [executor] of an estate who is not a state-licensed, professional fiduciary must complete a training program approved by the Supreme Court **before Letters of Appointment** can be issued by the Clerk of the Court.

Training should be completed *and a statement that the training has been completed* should be brought to (or filed before) the hearing, though additional time to complete the training may be requested for good reason.

If you completed the (English-only) *online* training, you may either print the “**Certificate**” that appears at the end of each online program **or** submit the “**Declaration of Completion**” form included in this packet and which is also included with the Self-Service Center’s printed or online training materials, which are available in both English and Spanish.

See the “**Notice Regarding Training Requirements**” (PBT10i) in this packet for additional information.

STEP 3 BRING THESE DOCUMENTS TO THE COURT HEARING:

These documents will be filed if the Judicial Officer (Judge or Commissioner) grants the guardianship. Make at least **2 copies** to bring with you to the hearing.

- **ORDER OF APPOINTMENT** (PBGA81f)
- **ORDER TO GUARDIAN and ACKNOWLEDGMENT** (PBC80f)
- **LETTERS OF APPOINTMENT and ACCEPTANCE OF LETTERS** (PBC82f).
- **DECLARATION (or “Certificate”) OF COMPLETION OF TRAINING** (PBT80f)

AT THE HEARING:

- Be prepared to testify about why you think guardianship is needed.
- Bring any witnesses you think will help to testify as well.
- Bring a copy of **everything you already filed** with the Court in this matter.

STEP 4 AFTER THE HEARING:

- A. **IMMEDIATELY** after the Judge/Commissioner signs the guardianship papers, take the following original documents to the Probate Filing Counter.
- **Order of Appointment,**
 - **Order to Guardian and Acknowledgment,**
 - **Letters of Appointment,** and the
 - **Declaration** (or "Certificate") **of Completion of Training** (if not previously filed)

Ask the Clerk to issue the **LETTERS OF APPOINTMENT**. The Clerk will stamp and file the appropriate originals and return copies back to you for your records.

Note that the guardian(s) **must** have completed the court-ordered training program and turn in a "**Certificate**" or "**Declaration of Completion**" of that training before the Clerk can issue **Letters of Appointment**.

- B. **WITHIN 1 YEAR:** The guardian must file the first "**Annual Report of Guardian.**" The first report will report on the protected person's situation from the date of issuance of the **Letters of Appointment** through the last day of the ninth (9th) month after, and must be filed with the court on or before the anniversary of the date the "**Letters of Appointment**" were issued.

Annual Reports covering each 12 month period after the first must be filed on or before the anniversary date of the issuance of the **Letters, each and every year** after until the guardianship is terminated by court order.

Forms for the first Guardian's Report, and the annual reports to follow, are available at all Superior Court Self-Service Center locations or online. *

*On the web page listed above, look under "Probate Cases" "Guardianship/Conservatorship – General" for "Annual Report of Guardian – case numbers beginning "PB"", as shown below:

The screenshot shows the Superior Court Self-Service Center website. On the left is a vertical navigation menu with buttons for: Self-Service Center, Downloadable Forms, Forms and Instructions, Civil Cases, Criminal Cases, Deferral of Court Fees, Domestic Violence and Protective Orders, Family Court, General Court Forms, Juvenile Cases, Power of Attorney, Probate Cases, Property Tax Appeal, Protective Order Center, Service of Court Papers, List of Available Forms, Frequently Used Forms List, and Resources. The main content area is titled 'Superior Court > Self-Service Center > Forms > Probate Cases' and contains 'Probate Case Forms'. Below this, it says 'For additional issues involving Guardianship see Juvenile Case Forms.' The 'Probate Cases' section is divided into 'For Adults:' and 'For Minors:'. The 'For Adults:' list includes: Guardianship and Conservatorship, Conservatorship Only, Guardianship Only, Discharge and/or Termination of Guardianship or Conservatorship, and Update Your Name and/or Address with The Court. The 'For Minors:' list includes: Guardianship and Conservatorship, Conservatorship Only, Guardianship Only - (File at the Juvenile Court), Discharge and Termination of Guardianship or Conservatorship (for case numbers beginning "PB" only; or case numbers beginning "PB"); Discharge and Termination of Juvenile Guardianship (for cases beginning "JG" only), and Update Your Name and/or Address with The Court. Below these is the 'Guardianship/Conservatorship - General:' section, which includes: Accounting, Release of Restricted Funds, Objection, and Annual Report of Guardian (case numbers beginning "PB"; Juvenile cases beginning "JG"). A black arrow points to the 'Annual Report of Guardian' link.

SELF SERVICE CENTER

APPOINTMENT OF GUARDIAN FOR AN ADULT
(or person at least 17.5 years of age)

PART 3: PREPARING FOR AND ATTENDING THE COURT HEARING

CHECKLIST

You may use this packet if . . .

- ✓ You filed papers to request the court appoint a guardian for an incapacitated adult, **or** for a person who is at least 17 and a half years of age who will need a guardian as an adult;
- ✓ You gave or will give notice of the court filing to all interested parties;
- ✓ A court hearing is scheduled;
- ✓ **The person to serve as guardian completed or will complete any court-ordered training before the hearing;*** AND
- ✓ You need the paperwork to prepare for and take to the court hearing.

* See **Notice Regarding Training Requirement** in this packet.

READ ME: Consulting a lawyer before filing documents with the court may help prevent unexpected results. A list of lawyers you may hire to advise you on handling your own case or to perform specific tasks, as well as a list of court-approved mediators can be found on the Self-Service Center website.

Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
Lawyer's Bar Number: _____
Licensed Fiduciary Number: _____



Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN GRAHAM COUNTY

In the Matter of the Estate of: _____

Case Number GC: _____

DECLARATION OF COMPLETION OF TRAINING for NON-LICENSED FIDUCIARIES

A Deceased or Protected Person

Rule 27.1 of the Arizona Rules of Probate Procedure requires that a person to be appointed guardian, conservator, or personal representative of an estate, who is neither a state-licensed fiduciary nor a corporation, complete a training program approved by the Supreme Court of this state before permanent **Letters of Appointment** are issued, or within 30 days of a temporary or emergency appointment.

UNDER PENALTY OF PERJURY

I state to the Court that in accord with Rule 27.1 of the Arizona Rules of Probate Procedure, I have completed the required training for non-licensed, non-corporate fiduciaries, as indicated below: (Check all that apply and provide applicable information.)

- | | |
|--|-----------------------|
| <input type="checkbox"/> Unlicensed Fiduciary | Date completed: _____ |
| <input type="checkbox"/> Conservatorship | Date completed: _____ |
| <input type="checkbox"/> Personal Representative | Date completed: _____ |
| <input type="checkbox"/> Guardianship | Date completed: _____ |

Date: _____

Signature _____

Printed Name _____

INSTRUCTIONS: Fill out this Declaration completely and provide accurate information. Make at least one copy. You will need to file the original with the Clerk of Court and provide a copy to the Probate Registrar before receiving any *permanent* letters of appointment.

Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
Lawyer's Bar Number: _____
Licensed Fiduciary Number: _____

FOR CLERK'S USE ONLY

Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN GRAHAM COUNTY

In the Matter of Guardianship of:

Case Number: GC _____

ORDER TO GUARDIANS of an ADULT AND ACKNOWLEDGMENT and INFORMATION TO INTERESTED PERSONS

Name of Protected Adult

Warning: This appointment is not effective until the *Letters of Appointment* have been issued by the Clerk of the Superior Court.

The welfare and best interest of the person named above ("your ward") are matters of great concern to this Court. By accepting appointment as guardian, you have subjected yourself to the power and supervision of the Court. . Therefore, to help avoid problems and to assist you in the performance of your duties, this order is entered. You are required to be guided by it and comply with its provisions as it relates to your duties as guardian of your ward, as follows:

1. You have powers and responsibilities similar to those of a parent of a minor child, except that you are not legally obligated to contribute to the support of your ward from your own funds.
2. Unless the order appointing you provides otherwise, your duties and responsibilities include (but are not limited to) making appropriate arrangements to see that your ward's personal needs (such as food, clothing, and shelter) are met.
3. You are responsible for making decisions concerning your ward's educational, social, and religious activities. If your ward is 14 years of age or older, you must take into account the ward's preferences to the extent they are known to you or can be discovered without unreasonable effort.
4. You are responsible for making decisions concerning your ward's medical needs. Such decisions include (but are not limited to) the decision to place your ward in a nursing home or other health care facility and the employment of doctors, nurses, or other professionals to provide for your ward's health care needs. However, you are to use the least restrictive means and environment available that meet your ward's needs.

5. You may arrange for medical care to be provided even if your ward does not wish to have it, but you may not place your ward in a level one behavioral health facility against your ward's will unless the Court specifically has authorized you to consent to such placement.
6. **You may handle small amounts of money or property belonging to your ward without being appointed conservator.** As a general rule, "small amount" means that the ward does not receive income (from all sources) exceeding **\$10,000.00 per year**, does not accumulate excess funds exceeding that amount, and does not own real property. **If more than these amounts come into your possession, or are accumulated by you, you are required to petition for the appointment of a conservator, whether yourself or someone else.**
7. If you handle any money or property belonging to your ward, you have a duty to do each of the following:
 - a. Care for and protect your ward's personal effects;
 - b. Apply any moneys you receive for your ward's current support, care, and education needs, and conserve any excess funds not so spent for your ward's future needs;
 - c. Maintain your ward's funds in a separate account, distinct from your own and identified as belonging to the ward;
 - d. Maintain records of all of the ward's property received and expended during the period of the guardianship;
 - e. Account to your ward or your ward's successors at the termination of the guardianship, if requested; and,
 - f. Not purchase, lease, borrow, or use your ward's property or money for your benefit or for the benefit of anyone else's, without prior Court approval.
8. You shall not accept any compensation of any kind for placing your ward in a particular nursing home or other care facility, using a certain doctor, or using a certain lawyer. "Compensation" includes, but is not necessarily limited to, direct or indirect payments of money, "kickbacks", gifts, favors, and other kinds of personal benefits. If you believe a certain placement or service that is in the best interest of your ward might be considered self-dealing or a conflict of interest, you must document to the court your reasoning and obtain court approval.
9. You will need to obtain a certified copy of the letters of appointment that are issued to you by the Clerk of the Superior Court. Your certified copy is proof of your authority to act as guardian of your ward, and you should have it available when acting on behalf of your ward. You may need to obtain additional (or updated) copies from time to time for delivery to, or inspection by, the people with whom you are dealing.
10. You are required to report annually, in writing, with respect to your ward's residence, physical and mental health, whether there still is a need for a guardian, and (if there is no conservator) your ward's financial situation. Your report is due each year on or before the anniversary date of the letters of appointment.
11. If your ward's physical address changes, you shall notify the Court by updating the probate information form within three (3) days of learning of the change in your ward's physical address. If your ward dies, you shall notify the Court in writing of the ward's death within ten (10) days of learning that the ward has died, **and** provide the court with a list of the ward's known assets.

12. You must be conscious at all times of the needs and best interests of your ward. If the circumstances that made a guardianship necessary should end, you are responsible for petitioning to terminate the guardianship and obtaining your discharge as guardian. Even if the guardianship should terminate by operation of law, you will not be discharged from your responsibilities until you have obtained an order from this Court discharging you.
13. If you should be unable to continue with your duties for any reason, you (or **your** guardian or conservator, if any) must petition the Court to accept your resignation and appoint a successor (a replacement guardian). If you should die, your personal representative or someone acting on your behalf must advise the Court and petition for the appointment of a successor.
14. If you have any questions about the meaning of this order or the duties which it and the statutes impose upon you by reason of your appointment as guardian, you should consult an attorney or petition the Court for instructions.
15. If you are not a certified fiduciary and are not related by blood or marriage to the ward, you are not entitled to compensation for your services as the ward's guardian and conservator. See A.R.S. §14-561(K)(1).
16. Within thirty (30) days after your letters of appointment as guardian are issued, you must mail a copy of this "**Order to Guardian and Acknowledgment and Information to Interested Persons**" to the following:
 - a. Your ward;
 - b. Your ward's attorney, spouse, parents, and adult children (if any);
 - c. Your ward's conservator if one has been appointed (other than yourself); and
 - d. Any person who has filed a demand for notice in connection with this matter.

MENTAL HEALTH POWERS: If you have been granted authority to consent to inpatient mental health treatment for the ward, the following additional duties and obligations apply:

1. You are additionally responsible for making decisions concerning your ward's mental health needs, including the decision to place your ward in a mental health treatment facility.
2. The court has granted you the authority to place the ward in a level one mental health treatment facility for inpatient mental health treatment. This means that you have the authority to admit the ward for inpatient mental health treatment. With that authority goes certain legal responsibilities which include:
 - a. You must seek the advice and assistance of qualified mental health professionals in determining your ward's needs for care and treatment, the degree of rehabilitation possible, and the best possible placement for your ward.
 - b. You must choose the care and treatment that is most suitable for your ward, taking into account the ward's needs and preferences, which will allow your ward to achieve the maximum possible degree of rehabilitation or recovery.

c. In making placement decisions, you must first seek alternatives to hospitalization. You should give due regard to the first preference of allowing the ward to live at home with family or friends, and to the second preference of placement in a mental health treatment facility close to home in an environment less restrictive than a hospital. Inpatient hospitalization should be your last resort.

d. Within forty-eight hours after placement of the ward in an inpatient treatment facility, the guardian must give notice of this action to the ward's attorney.

e. The inpatient behavioral health treatment facility is required to assess the appropriateness of the ward's placement in the facility every thirty days and provide a copy of the assessment report to the ward's attorney. You need to assure that this assessment is timely completed and that the assessment report is mailed to the ward's attorney.

f. When the ward is admitted to a level one behavioral health treatment facility, you must provide the facility with the name, address and telephone number of the ward's attorney. The facility shall include this information in the ward's treatment record.

g. You must place the ward in the least restrictive treatment alternative within ten days after you are notified by the medical director of the inpatient facility that the ward no longer needs inpatient care. If you cannot arrange alternative placement within that period of time after discussion with the medical director, or if you and the medical director disagree about the feasibility or availability of alternative placement, either you or the medical director, or both of you may request the Court to hold a hearing on the matter. If you request a hearing, the Court will set a hearing on the matter.

3. YOUR AUTHORITY TO ADMIT THE WARD TO A LEVEL ONE BEHAVIORAL HEALTH FACILITY FOR INPATIENT MENTAL HEALTH CARE IS LIMITED TO ONE YEAR. Unless the Court orders the continuation of your inpatient mental health treatment authority for another year, your power to admit the ward for inpatient mental health treatment will lapse on the anniversary of your appointment.

If you want the inpatient placement authority to continue, you must request continuance of that authority by filing an evaluation report prepared by a psychiatrist or psychologist explaining the ward's current need for inpatient mental health care and treatment with your Annual Report of Guardian.

If no evaluation report is filed or if the evaluation report states that the ward is not currently in need of inpatient mental health treatment, your authority to consent to inpatient mental health care will cease. You must send a copy of your Annual Report of Guardian and the evaluation report to the ward's attorney. You should file the Annual Report of Guardian and evaluation report at least 30 days prior to the expiration date of your authority.

The ward through his or her attorney has a right to challenge your request for renewal of your authority to consent to inpatient mental health treatment. Any objection to your request must be filed within ten business days of the filing of your Annual Report of Guardian and evaluation report. The court must hold a hearing within thirty calendar days after it receives the objection. Your inpatient mental health treatment authority continues pending the court's ruling on the issue. At the hearing, you have the burden of proving by clear and convincing evidence that the ward is currently in need of inpatient mental health care and treatment.

Case Number GC: _____

If you are requesting renewal of your authority to consent to inpatient mental health care, in addition to the ward's attorney, you must send a copy of your Annual Report of Guardian and the evaluation report to the medical director of the mental health treatment facility or agency responsible for the ward's care and treatment. If your ward is in the Arizona State Hospital, you should send a copy of the Annual Report of Guardian and the evaluation report to: Medical Director, Arizona State Hospital, 2500 E. Van Buren, Phoenix, AZ 85008.

Should your authority to consent to inpatient mental health care cease, you still have the authority to consent to psychiatric and psychological care and treatment, including the administration of psychotropic medications, if the care and treatment takes place outside a level one behavioral health facility licensed by the department of health services.

THIS IS ONLY AN OUTLINE OF **SOME** OF YOUR DUTIES AS GUARDIAN(S). IT IS **YOUR** RESPONSIBILITY TO OBTAIN PROPER LEGAL ADVICE ABOUT YOUR DUTIES. FAILURE TO DO SO MAY RESULT IN PERSONAL FINANCIAL LIABILITY FOR ANY LOSSES.

WARNING: FAILURE TO OBEY THE ORDERS OF THIS COURT AND THE STATUTORY PROVISIONS RELATING TO GUARDIANS MAY RESULT IN YOUR REMOVAL FROM OFFICE AND OTHER PENALTIES. IN SOME CIRCUMSTANCES, YOU MAY BE HELD IN CONTEMPT OF COURT, AND YOUR CONTEMPT MAY BE PUNISHED BY CONFINEMENT IN JAIL, FINE, OR BOTH.

Dated: _____

Signature of Judicial Officer or Judge Pro Tem

Printed Name of Judicial Officer/Judge Pro Tem

ACKNOWLEDGEMENT:

I (We), the undersigned, acknowledge receiving a copy of this order and agree to be bound by its provisions, whether or not read before signing, as long as serving as guardian or conservator.

Guardian - Conservator's Signature

Date

Co-Guardian - Conservator (if any)

Date

Printed Name

Printed Name

Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
Lawyer's Bar Number: _____
Licensed Fiduciary Number: _____



FOR CLERK'S USE ONLY

Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN GRAHAM COUNTY

In the Matter of Guardianship of:

Case Number: GC _____

**ORDER OF APPOINTMENT OF A
PERMANENT GUARDIAN OF AN ADULT**
Or Person at least 17.5 years of age to
become effective at 18.

Name of Incapacitated Adult

Warning: This appointment is not effective until the *Letters of Appointment* have been issued by the Clerk of the Superior Court.

The Court has read the sworn Petition for Permanent Appointment of Guardian, and held a hearing to determine whether the court should enter the Order requested in the Petition.

THE COURT FINDS:

- A. Petitioner is entitled to file the Petition under Arizona law, A.R.S. 14-5303(A);
- B. Petitioner has given Notice of Hearing as required by law or Notice of Hearing was waived by all interested parties;
- C. Venue in this county is proper;
- D. The reports of the physician (or other health professional authorized under A.R.S. § 14-5312) and the court investigator have been considered by the Court.
- E. **GUARDIANSHIP:**
 - 1. The above-captioned person is an incapacitated person and in need of the continuing care and supervision of a GUARDIAN.

2. The appointment of a guardian is necessary to provide for the demonstrated needs of the incapacitated person.
3. The needs of the incapacitated person cannot be met by less restrictive means, including technological assistance.
4. The person appointed below is competent to serve as Guardian.
5. The person appointed has priority for appointment under A.R.S. § 14-5311, or is otherwise appointed for good cause in accord with A.R.S. § 14-5311(D).

6. **TYPE OF GUARDIANSHIP:** Less restrictive alternatives having been considered:

- A GENERAL GUARDIANSHIP is warranted; A limited guardianship is not appropriate** or in the best interests of the incapacitated person.

(OR)

- A LIMITED GUARDIANSHIP**, carrying only such authority as specified on the pages that follow, is appropriate and adequate to protect the best interests and well-being of the ward.

PHYSICAL HEALTH:

7. Appointment of a GUARDIAN is necessary due solely to the Physical incapacity of the alleged incapacitated person

F. REGARDING MENTAL HEALTH:

- By clear and convincing evidence the ward requires inpatient mental health care and treatment.

G. REGARDING DRIVING PRIVILEGES:

- There is sufficient medical or other evidence to establish the ward's incapacity does **not** prevent or interfere with the safe operation of a motor vehicle.
- The ward's incapacity **does** prevent or interfere with the safe operation of a motor vehicle; therefore, the ward's driving privileges are suspended.

H. REGARDING VOTING RIGHTS:

- By clear and convincing evidence the ward has sufficient capacity and understanding to exercise the right to vote.
- The ward does **not** have sufficient capacity and understanding to exercise the right to vote.

IT IS ORDERED:

1. **The Court appoints:** _____
as permanent guardian for the incapacitated person named above.

The incapacitated person is a MINOR, and the appointment is effective as of
the minor's 18th birthday on this date:

(Month, Date, Year of the ward's 18th Birthday)

2. **BOND:** The Guardian must file a bond in the amount of \$ _____
with the Clerk of the Court, Probate Registrar by (date): _____

OR **Bond is not required.**

3. **ISSUANCE OF LETTERS:**

Upon filing of any required bond, "**Letters of Guardianship of an Adult**" shall be issued by the Clerk of the Court, Probate Registrar, subject to the following restrictions, if any:

A. **A LIMITED GUARDIANSHIP is ordered. The Guardian's authority is limited to:**

1. **Mental Health Care Powers:** (check all that apply)

Guardian is granted authority to consent to **outpatient** mental health treatment.

Guardian is granted authority to place the ward in a level one behavioral health facility for **inpatient** mental health care and treatment.

This authority expires on _____ (date).

2. (and/or) **The following specific powers indicated:**

Consent to Medical Treatment Consent to Marriage

Arrange Education or Training Consent to Make Living Arrangements

Apply for Public Assistance or Social Services

3. **OTHER LIMITED POWERS:** _____

(OR)

B. **A GENERAL GUARDIANSHIP is ordered, subject to the following restrictions (if any)**

4. **MENTAL HEALTH POWERS:** The guardian has the authority to consent to outpatient psychiatric and psychological care.

The Guardian is granted authority to place the ward in a level one behavioral health facility for **inpatient** mental health care and treatment.

This authority expires on this date: _____ .

5. **DRIVING PRIVILEGES:**

The Ward's right to keep or obtain a driver's license **is suspended**

The Ward's right to keep or obtain a driver's license **is NOT suspended**

VOTING RIGHTS:

The Ward's right to vote is **suspended**

The Ward's right to vote is **NOT suspended**.

6. **ACCEPTANCE OF LETTERS:** The Guardian shall sign the "**Acceptance of the Letters**" under oath or by affirmation, and file the **Acceptance** with the Clerk of the Court, Probate Registrar.

7. **ANNUAL REPORT OF GUARDIAN:** The Guardian shall report to the Court on the status of the incapacitated person and the need to continue the guardianship at least annually on or before the anniversary date of the **Letters of Appointment** as guardian, in accord with **A.R.S. § 14-5315**.

8. **CHANGE OF ADDRESS:** The Guardian shall notify the Court in writing within **3 days** of any change in the address of either the guardian or the ward.

9. **DEATH OF THE WARD:** If your ward dies, you shall notify the Court in writing of the ward's death within ten (**10**) days of learning that the ward has died.

10. **OTHER DUTIES UNDER LAW:** The duties of the Guardian as required by Arizona law and as set forth in this Order shall continue until the Guardian is discharged from these duties by order of this court.

11. DISCHARGE OF ATTORNEY:

- The court-appointed attorney is discharged from further duties in this matter, **or**
- The Court having found that the best interests of the protected or incapacitated person require continuing representation, the court-appointed attorney **is not discharged** from further duties in this matter at this time.

12. OTHER ORDERS: _____

Dated: _____

Signature of Judicial Officer or Judge Pro Tem

Printed Name of Judicial Officer/Judge Pro Tem

Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
Lawyer's Bar Number: _____
Licensed Fiduciary Number: _____

FOR CLERK'S USE ONLY

Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN GRAHAM COUNTY

In the Matter of Guardianship of:

Case Number: GC _____

LETTERS OF APPOINTMENT AS PERMANENT GUARDIAN of an ADULT and ACCEPTANCE OF LETTERS

Name of Protected Adult

ISSUANCE OF LETTERS:

1. (Guardian's Name:) _____
is appointed as guardian for the above-named adult, or person at least 17.5 years
of age to become effective on reaching the age of 18 on *this date*: _____

2. Reason for appointment: The above-named adult is an incapacitated person.

3. Length of appointment: until further order of this court.

4. Restrictions that apply to this permanent appointment, by order of the court:

5. **INPATIENT MENTAL HEALTH CARE:**
The Guardian does not have, or has authority to place the ward in a level one behavioral health facility for inpatient mental health care and treatment. This authority expires on _____ (date).

6. **DRIVING PRIVILEGES:**
 The Ward's right to obtain or retain a driver's license is **suspended**.
 The Ward's right to obtain or retain a driver's license is **NOT suspended**.

7. **VOTING RIGHTS:** The Ward/Incapacitated Person's right to vote is **NOT suspended**.

CLERK OF THE SUPERIOR COURT

WITNESS: _____

SEAL

By _____
DEPUTY CLERK OF COURT

Case No. _____

ACCEPTANCE OF LETTERS OF APPOINTMENT

State of Arizona)

Graham County) ss.

I accept the duties as permanent guardian of _____
(Name of Incapacitated Person)

and

I swear or affirm that I will perform these duties according to law.

Date

Signature of Guardian

Printed Name of Guardian

Sworn to or affirmed before me this date: _____

Darlee Maylen, Clerk of Superior Court

Notary

OR

My commission expires: _____
(or Seal below)

By: _____
Deputy Clerk of Court