

# GUARDIANSHIP WORKSHEET

HOUGHTON JONES, A.P.C.

In preparing for your consultation with the attorney, it will be helpful to have the following information available for discussion. Additionally, having this information in our file will expedite the Law Office's ability to immediately move forward with your guardianship matter.

## 1. Information about the Proposed Ward

Name: \_\_\_\_\_

Address in Nevada where the Proposed Ward resides: \_\_\_\_\_

\_\_\_\_\_

Name and address of person having the care, custody, or control of the Proposed Ward: \_\_\_\_\_

\_\_\_\_\_

Is this an institution? \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Marital Status:

Married – Date of marriage: \_\_\_\_\_

Divorced – Date of divorce: \_\_\_\_\_

Widowed – Date widowed: \_\_\_\_\_

Number of children \_\_\_\_\_

Names and addresses of children. If any child is a minor, please list the age of the child. (If more space is needed, please feel free to attach additional page.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name, relationship, and addresses of relatives within the second degree of consanguinity (parents, grandparents, siblings, children, grandchildren): (If more space is needed, please feel free to attach additional page.) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name and address of doctor:

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Does the Proposed Ward intend to attend the hearing? YES  NO  If not, can we obtain a doctor's certificate to excuse the Proposed Ward from the Court Hearing? YES  NO

Why is guardianship of the Proposed Ward needed? Please list areas where supervision or assistance is needed:

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The Law Office will need a certificate signed by a physician (who is licensed to practice medicine in the State of Nevada) stating the need for a guardian.

Please describe the approximate value of the property belonging to the Proposed Ward and any income to which the Proposed Ward is entitled. (This information is necessary for appointment of guardian of the *estate* or for appointment of special guardian.) It is necessary to inform the Court of any money that is paid or is payable to the Proposed Ward through the Department of Veterans Affairs. If the Proposed Ward is a veteran, please provide a copy of the service record or discharge papers.

Estimated monthly income:

Proposed Ward: \_\_\_\_\_

Spouse: \_\_\_\_\_

Estimated net worth of Proposed Ward: \_\_\_\_\_ (If married, provide combined net worth.)

Is the guardianship sought for the purpose of initiating litigation? YES  NO  (If yes, please explain) \_\_\_\_\_

Is the Ward a party to any litigation? (If yes, please explain) \_\_\_\_\_

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Does the Proposed Ward have a Will? YES  NO  If so, please provide a copy.

Has the Proposed Ward executed Durable Powers of Attorney for:

Health care: YES  NO

Financial matters: YES  NO

Written nomination of guardian: YES  NO

If the Proposed Ward has executed any of the above, please provide a copy.

**2. Information about the person seeking Guardianship (“Petitioner”)**

Name \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_

Relationship to the Proposed Ward \_\_\_\_\_

Is Petitioner a guardian for anyone besides Proposed Ward? YES  NO

Will Petitioner be receiving compensation for acting as guardian? YES  NO

Is Petitioner competent to act as guardian? YES  NO

Is Petitioner a professional guardian? YES  NO  If yes, please provide a proof of Certification.

Has Petitioner filed for bankruptcy within the last five year period? YES  NO

Has Petitioner ever been judicially determined to have committed abuse, neglect or exploitation of a child, spouse, parent or other person, or filed bankruptcy within the last five year period?

YES  NO  If yes, please explain: \_\_\_\_\_

Has Petitioner ever been convicted of a felony? YES  NO  (If so, can Petitioner provide information to the Court describing the conviction and state that the Petitioner was placed on probation?) YES  NO

Has Petitioner been suspended for misconduct or disbarred from the practice of law, the practice of accounting or any other profession which involves the management or sales of money, investments, securities or real property requiring licensure in Nevada or any other state?  YES  NO  If yes, please explain: \_\_\_\_\_

Does Petitioner feel that there are any special powers needed in this matter? If so, please explain: \_\_\_\_\_

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Any additional comments: \_\_\_\_\_

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**3. The Law Office will need copies of the following documents:**

- Birth Certificate of the Proposed Ward
- Picture Identification for both the Proposed Ward and person seeking guardianship (expired identification may be acceptable for Proposed Ward)
- Documentation of recent medical evaluations for the Proposed Ward
- Executed Will of the Proposed Ward
- Executed Durable Powers of Attorney for the Proposed Ward