

Your Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Self-Represented

**DISTRICT COURT**  
\_\_\_\_\_ **COUNTY, NEVADA**

In the Matter of the Guardianship of the:

- Person
- Estate
- Person and Estate

of:

\_\_\_\_\_  
(*name of child who needs a guardian*)  
A Proposed Protected Minor.

CASE NO.: \_\_\_\_\_

DEPT: \_\_\_\_\_

**PETITION FOR APPOINTMENT OF GENERAL GUARDIAN(S)**

Petitioner (*proposed guardian's name*) \_\_\_\_\_  
and Co-Petitioner (*proposed co-guardian's name; if only one guardian, write "N/A"*)  
\_\_\_\_\_ would like to be appointed the general Guardian(s)  
over the above-named child. In accordance with 2017 Nevada Laws Ch. 172 (A.B. 319),  
Petitioner(s) respectfully represents the following to this Honorable Court:

**Petitioner's Information (*the first proposed guardian*)**

1. Full legal name: \_\_\_\_\_.
2. Date of birth: \_\_\_\_\_.
3. Relationship to child in need of a guardian: \_\_\_\_\_.  
Petitioner is competent and capable of acting as guardian of the above proposed protected  
minor and hereby consents to act in this capacity.

4. Residence address:

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

Mailing address (*if different than residence address*):

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

5. Qualifications. (**Answer each item listed; “Has” answers must be explained**)

The Petitioner:

- has  has not been convicted of a crime of moral turpitude, a crime involving domestic violence or a crime involving the abuse, neglect, exploitation, isolation or abandonment of a child, his or her spouse, his or her parent or any other adult.

**Explain if Yes:** \_\_\_\_\_  
\_\_\_\_\_

- has  has never been convicted of a felony.

**Explain if Yes:** Petitioner was convicted of (*describe conviction*)

\_\_\_\_\_  
Petitioner ( **check one**)  was /  was not placed on parole and ( **check one**)  was /  was not placed on probation for that felony.

- has  has not filed for bankruptcy within the past 7 years.

- is  is not a party to pending criminal or civil litigation.

**Explain if Yes:** \_\_\_\_\_  
\_\_\_\_\_

**Co-Petitioner's Information (the second proposed guardian)**

Not Applicable (*check if there is only one proposed guardian, and go to page 5*)

6. Full legal name: \_\_\_\_\_.

7. Date of birth: \_\_\_\_\_.

8. Relationship to child in need of a guardian: \_\_\_\_\_.

Co-Petitioner is competent and capable of acting as guardian of the above proposed protected minor and hereby consents to act in this capacity.

9. Residence address:

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

Mailing address (*if different than residence address*):

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

10. Qualifications. (**Answer each item listed; "Has" answers must be explained**)

The Co-petitioner:

has  has not been convicted of a crime of moral turpitude, a crime involving domestic violence or a crime involving the abuse, neglect, exploitation, isolation or abandonment of a child, his or her spouse, his or her parent or any other adult.

**Explain if Yes:** \_\_\_\_\_  
\_\_\_\_\_

has  has never been convicted of a felony.

**Explain if Yes:** The Petitioner was convicted of (*describe conviction*)

\_\_\_\_\_  
The Petitioner ( **check one**)  was /  was not placed on parole and ( **check one**)  was /  was not placed on probation for that felony.

has  has not filed for bankruptcy within the past 7 years.

is  is not a party to pending criminal or civil litigation.

**Explain if Yes:** \_\_\_\_\_  
\_\_\_\_\_

### Child's Information

11. Child's full legal name: \_\_\_\_\_.

12. Child's date of birth: \_\_\_\_\_; current age: \_\_\_\_\_. The child will become 18 years old on (*date*) \_\_\_\_\_.

13. Petitioner(s) believe the child ( **check one**)  will /  will not need a guardian when the child turns 18 years old. If yes, explain why a guardian will still be needed:

\_\_\_\_\_.

14. The child has been a resident of the State of (*state*) \_\_\_\_\_ since (*date*) \_\_\_\_\_.

15. The child currently lives at the following address:

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

The child has lived at the above address since (*date*) \_\_\_\_\_.

16. The child is currently under the care of (*name and address of person caring for the child*):

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

The person above is caring for the child because (*explain why the child is under the care of the person above*):

\_\_\_\_\_  
\_\_\_\_\_

17. Does this child receive Medicaid, or has this child ever received Medicaid?

Yes

No

**Child's Mother**

18. Child's mother's full legal name: \_\_\_\_\_.

**check if applicable**)

The child's mother is deceased.

*\*File a copy of the death certificate with this Petition.\**

The mother's parental rights over the child have been terminated by a court order.

*\*File a copy of the termination order with this Petition.\**

19. The child's mother currently lives at the following address:

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

Mother's mailing address (*if different than residence address*):

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

20. Mother's Consent ( **check one**):

The mother agrees to this proposed guardianship and will file a proper notarized consent.

The mother does not consent to the proposed guardianship, or cannot be located to consent.

21. The child's mother is unable to care for the child because (*explain*):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Child's Father**

22. Child's father ( **check one**):

- The child's father is unknown, there is no father listed on the child's birth certificate. There has never been a court order regarding child support, custody, or a finding of paternity.
- The child's father is deceased.  
*\*File a copy of the death certificate with this Petition.\**
- The father's parental rights over the child have been terminated by a court order.  
*\*File a copy of the termination order with this Petition.\**
- The child's father is known. The father's full legal name is:  
(father's name) \_\_\_\_\_.

23. The child's father currently lives at the following address:

\_\_\_\_\_  
Address  
\_\_\_\_\_  
City, State, Zip Code

Father's mailing address (*if different than residence address*):

\_\_\_\_\_  
Address  
\_\_\_\_\_  
City, State, Zip Code

24. Father's Consent ( **check one**):

- The father agrees to this proposed guardianship and will file a proper notarized consent.
- The father does not consent to the proposed guardianship, or cannot be located.

25. The child's father is unable to care for the child because (*explain*):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**General Information**

26. A general guardianship is needed for the child because (*explain in detail*):

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27. The child’s parent or legal guardian ( **check one**)  has /  has not nominated a guardian in writing. The nominated guardian is (*name*) \_\_\_\_\_.

28. Current Custody Case: ( **check one**)

- There **IS NOT** a current order concerning custody of the child.
- There **IS** a current order concerning custody of the child. The order is from the State of \_\_\_\_\_ and was filed on (*date*) \_\_\_\_\_. If the order was not registered with this Court, a copy of the order will be filed with this Petition.

29. Abuse/Neglect Report: ( **check one**)

- The guardianship **IS NOT requested** because of an investigation of abuse or neglect conducted by Child Protective Services (CPS) or law enforcement.
- The guardianship **IS requested** because of an investigation by Child Protective Services (CPS) or other similar agency. The investigating agency is (*name of agency*) \_\_\_\_\_. The caseworker’s name is (*caseworker name*) \_\_\_\_\_. The investigating agency ( **check one**)  does /  does not approve of this guardianship and the placement of the child with the proposed Guardians.

30. The child ( **check one**)  is /  is not a party to any pending criminal or civil lawsuit. Explain if child is a party to litigation: \_\_\_\_\_

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31. A guardianship ( **check one**)  is /  is not sought for the purpose of initiating litigation. Explain if guardianship is sought to initiate lawsuit: \_\_\_\_\_  
\_\_\_\_\_
32. **Confidential Information Sheet – Guardianship** must be completed and filed. You must provide at least one form of identification (listed on the sheet) for each person.
33. **Exhibit A: Information Regarding the Child’s Estate** must be completed and attached to this petition if you are requesting guardianship over the child’s estate.
34. **Exhibit B: List of All of the Child’s Relatives** must be completed and attached to this petition.
35. **Other Exhibits:** If you have a letter from a 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, the letter/certificate must be attached to this petition.

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

DATED (*month*) \_\_\_\_\_ (*day*) \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(First Petitioner’s Signature)  
\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Second Petitioner’s Signature)  
\_\_\_\_\_  
(Printed Name)

**VERIFICATION**

I, (*name of first 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.

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FIRST PETITIONER

**VERIFICATION**

I, (*name of second 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.

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SECOND PETITIONER

**EXHIBIT A: Information Regarding the Proposed Protected Person’s Estate**

Complete this page only if you are requesting guardianship over the estate.

1. The proposed protected person ( **check all that apply**)
- Has no assets or income
  - Has assets and income (*list below*)
  - Is entitled or will be entitled to assets or income (*list below*)
2. The proposed protected person receives income from the following: (*include all income, including Social Security, Department of Veteran’s Affairs, pensions, etc. If none, write “N/A”. If there are not enough lines below, write “SEE ATTACHED” and attach a page with the additional income sources.*) (**check and answer all that apply**)

Social Security	<input type="checkbox"/> Yes <input type="checkbox"/> No	monthly: \$ _____
Dept. of Veterans Affairs	<input type="checkbox"/> Yes <input type="checkbox"/> No	monthly: \$ _____
a. _____		monthly: \$ _____
b. _____		monthly: \$ _____
c. _____		monthly: \$ _____

3. The proposed protected person’s assets are: (*include all assets including checking / savings / investment accounts, real estate, vehicles, inheritances, including insurance policies, etc. If none, write “N/A”. If there are not enough lines below, write “SEE ATTACHED” and attach a page containing the additional assets.*)

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

If you are appointed the Guardian, the Court will determine how to safeguard the protected person’s funds. This Court will decide whether to:

- Require the funds to be placed into a blocked account. Proof of Blocked Account must be filed with the Clerk of Court before Letters of Guardianship may be issued by the Clerk of Court.
- Require the Petitioner to obtain a bond in an amount equal to the total amount of the proposed protected person’s liquid assets. Proof of the bond must be filed with the Clerk of Court within 30 days of your appointment as guardian.

**Information regarding the proposed protected person’s assets must also be included on the Inventory you must file with the Court within 60 days of your appointment.**

**EXHIBIT B: List All of the Child's Relatives**

**Mother:**

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

Address: \_\_\_\_\_

Address Unknown     Deceased

**Father:**

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

Address: \_\_\_\_\_

Address Unknown     Deceased

**Grandparents (on mother's side):**

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

Address: \_\_\_\_\_

Address Unknown     Deceased

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

Address: \_\_\_\_\_

Address Unknown     Deceased

**Grandparents (on father's side):**

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

Address: \_\_\_\_\_

Address Unknown     Deceased

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

Address: \_\_\_\_\_

Address Unknown     Deceased

**Brothers and Sisters (age 14 and older):**

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

Address: \_\_\_\_\_

Address Unknown

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

Address: \_\_\_\_\_

Address Unknown

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

Address: \_\_\_\_\_

Address Unknown

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

Address: \_\_\_\_\_

Address Unknown