

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

CASE NO.: _____

DEPT: _____

of:

(name of adult who needs a guardian)
A Proposed Protected Person.

ADMONISHMENT OF RIGHTS FOR PROPOSED PROTECTED PERSON

A person who is not a petitioner in this action must:

- Advise the adult that the petitioners have asked to be appointed his/her guardian(s); AND
- Ask if the adult has a response to the petition for guardianship; AND
- Ask if the adult has a preference for a particular person to be appointed his/her guardian; AND
- Inform the adult that he/she has the right to appear at the court hearing in person or via videoconference.

THIS IS REQUIRED EVEN IF THE ADULT IS NON-RESPONSIVE (you can explain that in #5). The proposed guardians should not be present when this is done. The adult's responses must be indicated below.

1. I am (*your name*) _____ . I have informed the adult that (*name of first proposed guardian*) _____ and (*name of second proposed guardian, or "n/a"*) _____ is / are requesting that the court appoint a Guardian(s) for him/her.

2. I asked the adult for a response to the Guardianship petition. Their response was:
(describe what, if anything, the person said about the petition):

3. I asked the adult who he / she would prefer be appointed as guardian. The adult indicated a preference that the following person be appointed: (**check one**) no one / petitioner(s) someone else: (name of person the adult would like appointed)

4. I informed the adult that he / she has a right to appear at the hearing regarding this petition which is scheduled for (month) _____ (day) _____, 20____, at _____ a.m. p.m., at the courthouse located at (court address)

He / she indicated he / she (**check one**)

- Wants to attend the hearing in person.
- Wants to attend the hearing by videoconference.
- Does not want to attend the hearing.

The responses of the adult may have been limited by: (describe any conditions that may have limited the adult's ability to provide a response) _____

DATED (month) _____ (day) _____, 20____.

(Signature)

(Printed Name)