

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 adult who needs a guardian*)  
A Proposed Protected Person.

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

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

**CITATION TO APPEAR AND SHOW CAUSE**

TO: (*Name of Adult Who Needs a Guardian*) \_\_\_\_\_

ALL KNOWN RELATIVES OF THE ADULT

ANY PERSON HAVING THE CARE, CUSTODY, AND CONTROL OF THE ADULT

DIRECTOR OF THE DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF VETERANS AFFAIRS

**PLEASE TAKE NOTICE** that the following person(s) (*proposed guardian's name*)  
\_\_\_\_\_ and (*proposed co-guardian's name*)  
\_\_\_\_\_ have petitioned the court to be  
appointed the guardian(s) of the proposed protected person named above.

The proposed protected person may be determined to be incapacitated or of limited capacity, and a guardian may be appointed for the proposed protected person.

The rights of the proposed protected person may be affected as specified in the petition.

The proposed protected person has the right to appear at the hearing and to oppose the petition.

The proposed protected person has the right to be represented by an attorney, who may be appointed by the court if the proposed protected person is unable to retain one.

At any time after the filing of a Petition to Appoint Guardian, the court may appoint: (1) An attorney; (2) A guardian ad litem or an advocate; or (3) an investigator, if found to be appropriate or necessary in the best interest of the proposed protected person.

**DATE AND TIME OF COURT APPEARANCE**  
*(the court clerk will fill this out)*

**YOU ARE DIRECTED TO APPEAR AND SHOW CAUSE** why a guardian should not be appointed for the proposed protected person on the:

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_  a.m.  p.m., at the courthouse of the \_\_\_\_\_ Judicial District Court, located at *(insert full address)*: \_\_\_\_\_, Courtroom number \_\_\_\_\_.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

CLERK OF COURT

BY: \_\_\_\_\_  
Deputy Court Clerk

**NOTE:** The proposed guardian(s) and the proposed protected person (unless excused by a physician) must appear at the scheduled hearing; all other interested parties do not need to appear unless they wish to oppose the guardianship and enter an objection.