

COURT CODE: _____
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 person who has a guardian)
A Protected Person.

CITATION TO APPEAR AND SHOW CAUSE

TO: *(protected person's name)* _____
(protected person's attorney's name) _____
(guardian's names) _____

ALL KNOWN RELATIVES OF THE PROTECTED PERSON:

(Write each relative's name on a separate line) _____

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

PLEASE TAKE NOTICE that the following person(s) (*first petitioner's name*)
_____ and (*second petitioner's name, or*
"n/a" if none) _____ have filed a petition
asking the court to (*check one*)

- Terminate the guardianship;
- Remove the current guardian;
- Other: (*name of the petition filed*) _____

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

YOU ARE DIRECTED TO APPEAR AND SHOW CAUSE why the court should not
grant the relief requested 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 CLERK

NOTE: The guardian(s) and the petitioner(s) must attend the scheduled hearing; all other
interested parties do not need to attend unless they want to oppose the relief requested.