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 of: _____ (*name of child who needs a guardian*) A Proposed Protected Minor.	CASE NO.: _____ DEPT: _____

CERTIFICATE OF MAILING FOR THE PETITION FOR APPOINTMENT OF GUARDIANS

I HEREBY CERTIFY that I served the: (☒ *check all that apply*)

- ☐ Petition for Appointment of Guardian
- ☐ Citation to Appear and Show Cause
- ☐ Other: _____

on *(month)*_____ *(day)*_____, 20___, by depositing a copy of the same in the U.S. Mail, enclosed in sealed envelopes, prepaid Certified Mail, Return Receipt Requested, addressed to:

Relatives / Required Notices:

Name: _____
Address: _____
_____

Name: _____
Address: _____
_____

© 2025 Nevada Supreme Court

Name: _____
Address: _____
_____

Name: _____
Address: _____
_____

Name: _____
Address: _____
_____

Name: _____
Address: _____
_____

Name: _____
Address: _____
_____

Name: _____
Address: _____
_____

Name: _____
Address: _____
_____

Name: _____
Address: _____
_____

If the child is in the care, custody, or control of a child welfare agency, you must serve the agency and complete this section:

Child Welfare Agency: _____
Street Address: _____
City, State, Zip: _____

I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.

This document does not contain the personal information of any person as defined by NRS 603A.040.

DATED (*month*) _____ (*day*) _____, 20___.

/s/
_____
(Signature)

_____
(Printed Name)

ATTACH THE SIGNATURE RECEIPTS (GREEN CARDS FROM THE POST OFFICE) TO THIS FORM WHEN RECEIVED