

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.