



## Petition for Guardianship of Person Only (Step 1)

**Note** – You may not need to go through Court hearings to establish guardianship. Read the Caregiver’s Authorization Affidavit Coversheet before you begin work on this packet. This simple form allows a relative to enroll a child in school and to authorize medical and dental treatment. The Court has attached a copy of that form for your use. You may also download that form at: <http://www.courtinfo.ca.gov/selfhelp/family/guardianship/documents/caregiver.pdf>

Review the California Probate Code regarding Guardianships, beginning with section 1510 through section 1543 before completing these forms. You can review the California Probate Code at the Public Law Library and on the web at <http://www.leginfo.ca.gov/calaw.html>.

**ASSISTANCE** Guardianship is a complex legal procedure. If you represent yourself, you may get assistance from the Court’s Self Help Center located in Room 113 on the first floor of the Family Relations Courthouse (see the attached flyer). If you need help finding an attorney, contact the State Bar ([www.calbar.ca.gov](http://www.calbar.ca.gov)) or the County Bar ([www.sacbar.org](http://www.sacbar.org)) before attempting to complete this packet yourself.

**FILING FEE** There is a \$225 fee to file these documents. The current fee schedule may be found on the Court’s website at: <https://www.saccourt.ca.gov/fees/docs/fee-schedule.pdf>

**ASSESSMENT FEES** After you or your attorney files the petition, a Probate Court Investigator will conduct an investigation. After finishing the investigation, the Probate Court Investigator will make a recommendation to the Judge about the appropriateness of the guardianship. The investigation requires an additional fee of **\$800.00. Only a judge can waive this fee.**

**COMPLETE THE ATTACHED FORMS** **GC-210(P)** – Petition for Appointment of Guardian of Person



---

**GC-210 (CA)** – Guardianship Petition – Child Information Attachment

**\*Note** – You must include a separate GC-210 (CA) for each child for whom you are requesting guardianship.

**GC-248** – Duties of Guardian

**GC-212** – Confidential Guardian Screening Form (Except Private Fiduciary, Public Guardian and Dept. of Developmental Services)

**\*Note** – You must include a separate GC-212 for each person seeking appointment as guardian.

**PR/E-LP-008** – Confidential Guardian Screening Form, Additional Page

**\*Note** – You must include a separate PR/E-LP-008 for each person seeking appointment as a guardian.

**GC-120** – Declaration Under Uniform Child Custody Jurisdiction and Law Enforcement Act (UCCJEA)

**ICWA-010** – Indian Child Inquiry Attachment

**GC240** - Order Appointing Guardian of Minor

**GC-250** – Letters of Guardianship

---

**COPIES**

Make two copies of the completed forms. The Court will file and keep one copy and return one endorsed copy to you. Bring the endorsed copies to all Court hearings.

---



## Caregiver's Authorization Affidavit

Before proceeding with the Petition for Guardianship packet, please review the Caregiver's Authorization Affidavit to determine if this process will best serve your needs. A court proceeding to establish guardianship may not be necessary. This simple form allows a relative to enroll a child in school and authorize medical and dental treatment. The Caregiver's Authorization Affidavit is not filed with the Sacramento Superior Court.

Please do not complete both the Caregiver's Authorization Affidavit and the Petition for Guardianship packet. Only one or the other is needed.

Pursuant to Family Code Section 6550:

A caregiver's authorization affidavit that meets the requirements of this part authorizes a caregiver 18 years of age or older who completes items 1 to 4, inclusive, of the affidavit provided in Section 6552 and signs the affidavit to enroll a minor in school and consent to school-related medical care on behalf of the minor. A caregiver who is a relative and who completes items 1 to 8, inclusive, of the affidavit provided in Section 6552 and signs the affidavit shall have the same rights to authorize medical care and dental care for the minor that are given to guardians under Section 2353 of the Probate Code. The medical care authorized by this caregiver who is a relative may include mental health treatment subject to the limitations of Section 2356 of the Probate Code.

**\*NOTE\*** - The Caregiver's Authorization Affidavit does not affect the rights of the minor's parents or legal guardian regarding the care, custody and control of the minor, and does not mean that the caregiver has legal custody of the minor.

## CAREGIVER'S AUTHORIZATION AFFIDAVIT

Use of this affidavit is authorized by Part 1.5 (commencing with Section 6550) of Division 11 of the California Family Code.

**Instructions:** Completion of items 1-4 and the signing of the affidavit is sufficient to authorize enrollment of a minor in school and authorize school-related medical care. Completion of items 5 through 8 is additionally required to authorize any other medical care. Print clearly.

The minor named below lives in my home and I am 18 years of age or older.

1. Name of minor: \_\_\_\_\_
2. Minor's birth date: \_\_\_\_\_
3. My name: \_\_\_\_\_  
(adult giving authorization)
4. My home address: \_\_\_\_\_
5.  I am a grandparent, aunt, uncle, or other qualified relative of the minor (see back of this form for a definition of "qualified relative").
6. Check one or both (for example, if one parent was advised and the other cannot be located):
  - I have advised the parent(s) or other person(s) having legal custody of the minor of my intent to authorize medical care, and have received no objection.
  - I am unable to contact the parent(s) or other person(s) having legal custody of the minor at this time, to notify them of my intended authorization.
7. My date of birth: \_\_\_\_\_
8. My California driver's license or identification card number: \_\_\_\_\_

**Warning: Do not sign this form if any of the statements above are incorrect, or you will be committing a crime punishable by a fine, imprisonment, or both.**

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated: \_\_\_\_\_ Signed: \_\_\_\_\_

### NOTICES

1. **This declaration does not affect the rights of the minor's parents or legal guardian regarding the care, custody, and control of the minor, and does not mean that the caregiver has legal custody of the minor.**
2. **A person who relies on this affidavit has no obligation to make any further inquiry or investigation.**
3. **This affidavit is not valid for more than one year after the date on which it is executed.**

## ADDITIONAL INFORMATION

### TO CAREGIVERS:

- 1) "Qualified relative", for purposes of item 5, means a spouse, parent, stepparent, brother, sister, stepbrother, stepsister, half-brother, half-sister, uncle, aunt, niece, nephew, first cousin, or any person denoted by the prefix "grand" or "great" or the spouse of any of the persons specified in this definition, even after the marriage has been terminated by death or dissolution.
- 2) The law may require you, if you are not a relative or a currently licensed foster parent, to obtain a foster home license in order to care for a minor. If you have any questions, please contact your local department of social services.
- 3) If the minor stops living with you, you are required to notify any school, health care provider, or health care service plan to which you have given this affidavit.
- 4) If you do not have the information requested in item 8 (California driver's license or I.D.), provide another form of identification such as your social security number or Medi-Cal number.

### TO SCHOOL OFFICIALS:

- 1) Section 48204 of the Education Code provides that this affidavit constitutes a sufficient basis for a determination of residency of the minor, without the requirement of a guardianship or other custody order, unless the school district determines from actual facts that the minor is not living with the caregiver.
- 2) The school district may require additional reasonable evidence that the caregiver lives at the address provided in item 4.

### TO HEALTH CARE PROVIDERS AND HEALTH CARE SERVICE PLANS:

- 1) No person who acts in good faith reliance upon a caregiver's authorization affidavit to provide medical or dental care, without actual knowledge of facts contrary to those stated on the affidavit, is subject to criminal liability or to civil liability to any person, or is subject to professional disciplinary action, for such reliance if the applicable portions of the form are completed.
- 2) This affidavit does not confer dependency for health care coverage purposes.



## **Order Appointing Guardian or Extending Guardianship of the Person (GC-240) & Letters of Guardianship (GC-250)**

You must provide one original and one copy of the Order Appointing Guardian or Extending Guardianship of the Person (GC-240), and the Letters of Guardianship (GC-250) when you file the Petition for Guardianship of Person.

File the documents at the Probate Front Counter in Room 214 at the William R. Ridgeway Family Relations Courthouse. The Court will file and retain the original documents. The Court will endorse the copy and return it to you.

No appointment as a guardian is effective until the Judge signs the Order and the Court issues the Letters of Guardianship.

Follow these directions when completing the Order Appointing Guardian or Extending Guardianship of the Person (GC-240) and Letters of Guardianship (GC-250):

1. Complete the top sections of these two forms with your name, address, telephone number, and the ward's name [in the box that states "Guardianship of \_\_\_\_\_ name".
2. Complete item 1, and item 8 (a) on the Order (GC-240), including the names of all wards.
3. Complete item 1, and date, print, and sign your name on the second page of the Letters of Guardianship (GC-250).
4. If the judge grants the petition, the clerk will provide you with instructions for your next step.

**GC-210(P)**

**Petition for Appointment of Guardian of the Person**

Guardianship of the person of (all children's names):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Clerk stamps date here when form is filed.

You may use this form or the Petition for Appointment of Guardian of Minor (form GC-210) to petition, or ask, the court to appoint a guardian of the person. (You must use form GC-210 to ask the court to appoint a guardian of the estate or of both the person and the estate.)

Fill in court name and street address:  
**Superior Court of California, County of**

Clerk fills in information below when form is filed.  
**Case Number:**  
**Hearing Date and Time:** **Dept.:**

**1** **Your name** (Include the names of all persons who are requesting the court to appoint them or the person named in **4** as guardian for the child\* or children\* named above and in **8**). All must sign this form.):  
a. \_\_\_\_\_  
b. \_\_\_\_\_  
c. \_\_\_\_\_

**2** **Your address and telephone number:**  
Street: \_\_\_\_\_ Apt.: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

**3** **Your Lawyer** (if you have one):  
Name: \_\_\_\_\_ Bar No.: \_\_\_\_\_  
Firm name, if any: \_\_\_\_\_  
Street: \_\_\_\_\_ Suite: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**4** **I/We want to be guardian of the child or children named in 8 (Go to 5.)**  
 **I/We want the person or persons named here to be the guardian of the child or children named in 8. Tell the court about the proposed guardian(s) below.**  
Name(s): \_\_\_\_\_  
Street: \_\_\_\_\_ Apt.: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**I am the child or one of the children named in 8 and a person named in 1. I am at least 12 years old. I want the person or persons named here to be my guardian. My date of birth is (month/day/year): \_\_\_\_\_ Tell the court about the proposed guardian(s) below.**  
Name(s): \_\_\_\_\_  
Street: \_\_\_\_\_ Apt.: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Guardianship of the person of ( <i>all children's names</i> ):	Case Number:

- 5 The proposed guardian named in 1 or 4 is (check all that apply):
- a.  Related to the child or children named in 8, as shown in item 3 of the child's or children's attached *Guardianship Petition—Child Information Attachment* (form(s) GC-210(CA)).
  - b.  Not related to the child or children named in 8.
  - c.  A nominee of a parent of one or more of the children named in 8, as shown in item 5 of the child's or children's attached *Guardianship Petition—Child Information Attachment* (form(s) GC-210(CA)).
- 6  **Check this box if you checked the box in item 5b (guardian unrelated to child or children).** Answer the question in item a and check the box in item b or c. If you check the box in c, provide the signed statement of the proposed guardian on a separate sheet of paper. Write "*Form GC-210(P)—Attachment 6: Statement of Unrelated Guardian*" at the top of the paper and attach it to this form.
- a. Does the proposed guardian run a licensed foster family home?  Yes  No
  - b.  I am the proposed guardian. I will promptly furnish any information requested by an agency investigating an adoption or a local agency designated by the county to provide public social services.
  - c.  I am **not** the proposed guardian. The signed statement of the proposed guardian agreeing to promptly furnish any information requested by an agency investigating an adoption or a local agency designated by the county to provide public social services is attached to this form as Attachment 6.
- 7  **A person other than the proposed guardian(s) named in 1 or 4 has been nominated in a will or other writing as guardian of the child or children named in 8. A copy of the written nomination is attached.** Write "*Form GC-210(P)—Attachment 7: Nomination of Another Person as Guardian*" at the top of the writing and attach it to this form. Fill in the nominated person's name and address in item 2 of the *Guardianship Petition—Child Information Attachment* (form GC-210(CA)) for each child for whom the person was nominated as guardian.
- 8 **Tell the court about the child or children who need a guardian.** Fill out and attach to this form a separate copy of *Guardianship Petition—Child Information Attachment* (form GC-210(CA)) for each child named below. Show all children's names at the top of all pages of this form. Fill out and attach to this form a *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)* (form FL-105/GC-120) concerning all children under 18 years of age listed below.
- The full legal name and date of birth of each child who needs a guardian is (*specify*):
- a. Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_  

First
Middle
Last
Month/Day/Year
  - b. Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_  

First
Middle
Last
Month/Day/Year
  - c. Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_  

First
Middle
Last
Month/Day/Year
  - d. Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_  

First
Middle
Last
Month/Day/Year
  - e. Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_  

First
Middle
Last
Month/Day/Year
- Check here if there are additional children. Continue this list on a separate sheet of paper. Write "*Form GC-210(P)—Attachment 8: Additional Children*" at the top of the paper and attach it to this form.





Guardianship of the person of *(all children's names)*:

Case Number:

10 c.  Make the following additional orders *(specify)*:

\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

Check here if you need more space. Continue your request for additional orders on a separate sheet of paper. Write "Form GC-210(P)—Attachment 10c: Additional Orders" at the top of the paper and attach it to this form.

11 Filed with this petition are the following *(check all that apply)*:

- Consent of Proposed Guardian (form GC-211, item 1)
 Nomination of Guardian (form GC-211, items 2 and 3)
 Consent to Appointment of Guardian and Waiver of Notice (form GC-211, item 4).
 Petition for Appointment of Temporary Guardian or Conservator (form GC-110)
 Petition for Appointment of Temporary Guardian of the Person (form GC-110(P))
 Confidential Guardian Screening Form (form GC-212)
 Petition for Special Immigrant Juvenile Findings (form GC-220)
 Other *(specify)*:

\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

12 All attachments are made part of this form as though included here. There are \_\_\_\_\_ pages attached to this form.

Date: \_\_\_\_\_
Petitioner's attorney types or prints name here
Petitioner's attorney signs here

All petitioners and the proposed ward—if he or she is at least 18 but not yet 21 years of age and not a petitioner—must read and sign below.

I declare under penalty of perjury under the laws of the State of California that the information stated above is true and correct.

Date: \_\_\_\_\_
Petitioner types or prints name here
Petitioner signs here

Date: \_\_\_\_\_
Petitioner types or prints name here
Petitioner signs here

I consent to the appointment of the person named in 1 or 4 as guardian of my person and to his or her performance of the duties of a guardian on my behalf.

Date: \_\_\_\_\_
Proposed ward types or prints name here
Proposed ward signs here

Guardianship of (*all children's names*): \_\_\_\_\_

This child's name: \_\_\_\_\_

Fill out a separate copy of this form for **each** child for whom you want the court to appoint a guardian.**This form is attached to the Petition,  item 2 of form GC-210, or  item 8 of form GC-210(P).**The Petition asks for the appointment of a guardian of this child's (*specify*):  person  estate  person and estate**1 Tell the court about this child**a. Child's full legal name: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
First Middle Last Month/Day/Yearb. Child's current address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_c. (*If the Petition to which this form is attached asks for the appointment of a guardian of this child's estate only, skip this item 1c, select item 8 a on page 5, and answer the rest of the items in this form. If the Petition asks for the appointment of a guardian of this child's person or this child's person and estate, complete the steps described here. Ask the child, if he or she is old enough, and the child's parents or any other legal guardian, and any Indian custodian, whether the child is or may be an Indian (Native American) child. You may not rely merely on your own knowledge and belief about the child. If possible, ask these persons before you file your petition, including this form, so you can use the information you receive to answer questions (1) and (2) below. Answer those questions, item 8 on page 5, and the rest of the items in this form.*)**(For more information about your duties concerning a child who is or may be an Indian child involved in a guardianship of the person under the Indian Child Welfare Act ("ICWA") (25 U.S.C. § 1901 et seq.) and California law, including making the inquiry described above and completing this form, see the Information Sheet on Indian Child Inquiry Attachments and Notice of Child Custody Proceeding For Indian Child (form ICWA-005-INFO).)**(1) Is this child a member of, or eligible for membership in, one or more Indian tribes recognized by the federal government?  No  Not sure  Yes (*specify tribe or tribes*): \_\_\_\_\_  
 \_\_\_\_\_*(If you checked "Yes" to item (1), this guardianship case is subject to ICWA. If you checked "Not sure" or "No" to item (1), answer item (2).)*(2) Do you know or have reason to know (within the meaning of Prob. Code, §§ 1460.2(a), Welf. & Inst. Code, § 224.3(b), and Cal. Rules of Court, rule 7.1015), whether this child is or may be an Indian child?  No  Yes (*If you checked "Yes" to either item (1) or (2), you must file and serve a Notice of Child Custody Proceeding for Indian Child (form ICWA-030), in addition to service of any other notices required in this case. For information about what is "reason to know whether the child is or may be an Indian child" and the notice requirement, including who must be served, how to serve them, and how to prove to the court that you have done so, and how to fill out and file the Notice, see the Information Sheet on Indian Child Inquiry Attachments and Notice of Child Custody Proceeding For Indian Child (form ICWA-005-INFO).*)d. Is this child married?  Yes  No  Never married If you checked "No," was this child formerly married but the marriage was dissolved or ended in divorce?  Yes  No  
*(The court cannot appoint a guardian of the person for a minor child who is married or whose marriage was dissolved or ended in divorce.)*

Guardianship of (all children's names): \_\_\_\_\_

Case Number: \_\_\_\_\_

This child's name: \_\_\_\_\_

**1 Tell the court about this child (continued)**

e. Is this child receiving public assistance?  Yes  No  Unknown (If you checked "Yes," fill out below.)

Type of Aid	Monthly Benefit	Type of Aid	Monthly Benefit
<input type="checkbox"/> TANF (Temporary Asst. for Needy Families)	\$ _____	<input type="checkbox"/> Other (explain): _____	\$ _____
<input type="checkbox"/> Social Security	\$ _____	<input type="checkbox"/> Other (explain): _____	\$ _____
<input type="checkbox"/> Dept. Veterans Affairs Benefits	\$ _____		

f. Name and address of the person with legal custody of this child: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

g.  (Check this box and fill out below if the person the child lives with is not the person with legal custody.)  
Name and address of the person this child lives with (has the care of the child): \_\_\_\_\_  
\_\_\_\_\_

h.  (Check this box if this child has been involved in an adoption, juvenile court, marriage dissolution (divorce), domestic relations, custody, or other similar court case.) Describe the court case below:

Type of Case	Court District or County and State	Case Number (if known)

i.  (Check this box if this child is in or on leave from an institution supervised by the California Department of Developmental Services or the California Department of Mental Health.) Write the name of the institution here: \_\_\_\_\_

**2 List the names and addresses of this child's relatives and other persons shown below:**

Relationship	Name	Home Address (Street, City, State, Zip)
Father	_____	_____
Mother	_____	_____
Grandfather (Father's father)	_____	_____
Grandmother (Father's mother)	_____	_____
Grandfather (Mother's father)	_____	_____
Grandmother (Mother's mother)	_____	_____



Guardianship of (*all children's names*): \_\_\_\_\_

Case Number: \_\_\_\_\_

This child's name: \_\_\_\_\_

**2 Names and addresses of this child's relatives and other persons (continued):**

Relationship	Name	Home Address (Street, City, State, Zip)
Brother/Sister	_____	_____

(Check here if this child has additional brothers or sisters, including half-brothers and half-sisters, and list their names and addresses on a separate sheet of paper. Write "Form GC-210(CA)," the name of this child, and "Item 2:—Other Siblings" at the top of the paper and attach it to this form.)

Spouse  
(Guardianship of the estate only) \_\_\_\_\_

Person nominated as guardian of this child  
(Other than a proposed guardian listed in 3) \_\_\_\_\_

**3 Information about the proposed guardian:**

a. Name (name all proposed guardians if more than one): \_\_\_\_\_

b. Relationship(s) to the child named in 1 (check all that apply):

Relative (specify relationships of all proposed guardians to the child): \_\_\_\_\_

Not a relative (explain interest in or connection to this child): \_\_\_\_\_





Guardianship of (all children's names): \_\_\_\_\_

Case Number: \_\_\_\_\_

This child's name: \_\_\_\_\_

- 8 An Indian child inquiry concerning the child named above:
- a.  is not required; this is a guardianship of the estate only. (If you check this box, skip the rest of item 8.)
  - b.  has not been made or completed for the following reasons (check all that apply):
    - (1)  Petitioner knows the child is an Indian child and has identified the child's tribe or tribes in item 1.
    - (2)  Petitioner (or the proposed guardian if he or she is not the petitioner) is the child's Indian custodian.
    - (3)  Petitioner has been unable to communicate with the child's parents, other legal guardian, or Indian custodian for the following reasons and despite the following efforts to do so (describe):  
\_\_\_\_\_  
\_\_\_\_\_

(Check here if you need more space. Continue your explanation on a separate sheet of paper. Write "Form GC-210(CA)," the name of this child, and "Attachment 8b(3):—Indian Child Inquiry" at the top of the paper and attach it to this form.)
  - c.  has been made and the following information was obtained (check all that apply):
    - (1) The names, relationships to the child named above, addresses, and telephone numbers, of the persons interviewed by Petitioner to collect or confirm the information given below, and the date or dates the interviews took place, are provided on one or more separate sheets of paper attached to this form.  
(Write "Form GC-210(CA)," the name of this child, and "Attachment 8c(1):—Indian Child Inquiry" at the top of each page of paper you attach to this form to complete this item.)
    - (2)  The child is or may be a member of or eligible for membership in a tribe.  
Tribe or tribes: \_\_\_\_\_  
Band (if applicable): \_\_\_\_\_
    - (3)  The child's parents, grandparents, or great-grandparents are or were members of a tribe or tribes.  
Tribe or tribes: \_\_\_\_\_  
Band (if applicable): \_\_\_\_\_
    - (4)  The residence or domicile of the child, the child's parents, or the child's Indian custodian is in a predominantly Indian community.
    - (5)  The child or the child's family has received services or benefits from a tribe or services that are available to Indians from tribes or the federal government, such as the Indian Health Service or Tribal Temporary Assistance to Needy Families (TANF).
    - (6)  The child may have Indian ancestry.
    - (7)  Other reason or reasons to know the child is or may be an Indian child: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  - (8)  The child has no known Indian ancestry.

9 Except as otherwise stated in this form, the statements made in the Petition to which this form is attached fully apply to this child.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):		
TELEPHONE NO.:	FAX NO. (Optional):	
E-MAIL ADDRESS (Optional):		
ATTORNEY FOR (Name):		
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:		
GUARDIANSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE  OF (Name): <span style="float: right;">MINOR</span>		
<b>DUTIES OF GUARDIAN and Acknowledgment of Receipt</b>		CASE NUMBER:

## DUTIES OF GUARDIAN

When you are appointed by the court as a guardian of a minor, you become an officer of the court and assume certain duties and obligations. An attorney is best qualified to advise you about these matters. You should clearly understand the information on this form. You will find additional information in the *Guardianship Pamphlet (for Guardianships of Children in the Probate Court)* (Form GC-205), which is available from the court.

### 1. GUARDIANSHIP OF THE PERSON

If the probate court appoints you as a *guardian of the person* for a child, you will be required to assume important duties and obligations.

- a. **Fundamental responsibilities** - The guardian of the person of a child has the care, custody, and control of the child. As guardian, you are responsible for providing for food, clothing, shelter, education, and all the medical and dental needs of the child. You must provide for the safety, protection, and physical and emotional growth of the child.
- b. **Custody** - As guardian of the person of the child, you have full legal and physical custody of the child and are responsible for **all** decisions relating to the child. The child's parents can no longer make decisions for the child while there is a guardianship. The parents' rights are suspended—not terminated—as long as a guardian is appointed for a minor.
- c. **Education** - As guardian of the person of the child, you are responsible for the child's education. You determine where the child should attend school. As the child's advocate within the school system, you should attend conferences and play an active role in the child's education. For younger children, you may want to consider enrolling the child in Head Start or other similar programs. For older children, you should consider their future educational needs such as college or a specialized school. You must assist the child in obtaining services if the child has special educational needs. You should help the child in setting and attaining his or her educational goals.
- d. **Residence** - As guardian, you have the right to determine where the child lives. The child will normally live with you, but when it is necessary, you are allowed to make other arrangements if it is in the best interest of the child. You should obtain court approval before placing the child back with his or her parents.

As guardian, you **do not** have the right to change the child's residence to a place outside of California unless you first receive the court's permission. If the court grants permission, California law requires that you establish legal guardianship in the state where the child will be living. Individual states have different rules regarding guardianships. You should seek additional information about guardianships in the state where you want the child to live.

(Continued on reverse)

GUARDIAN OF (Name):	CASE NUMBER:
MINOR	

- e. Medical treatment** - As guardian, you are responsible for meeting the medical needs of the child. In most cases, you have the authority to consent to the child's medical treatment. However, if the child is 14 years or older, surgery may not be performed on the child unless either (1) both the child and the guardian consent or (2) a court order is obtained that specifically authorizes the surgery. This holds true except in emergencies. A guardian may not place a child involuntarily in a mental health treatment facility under a probate guardianship. A mental health conservatorship proceeding is required for such an involuntary commitment. However, the guardian may secure counseling and other necessary mental health services for the child. The law also allows older and more mature children to consent to their own treatment in certain situations such as outpatient mental health treatment, medical care related to pregnancy or sexually transmitted diseases, and drug and alcohol treatment.
- f. Community resources** - There are agencies in each county that may be helpful in meeting the specific needs of children who come from conflicted, troubled, or deprived environments. If the child has special needs, you must strive to meet those needs or secure appropriate services.
- g. Financial support** - Even when the child has a guardian, the parents are still obligated to financially support the child. The guardian may take action to obtain child support. The child may also be eligible for Temporary Aid for Needy Families, TANF (formerly known as AFDC), social security benefits, Veterans Administration benefits, Indian child welfare benefits, and other public or private funds.
- h. Visitation** - The court may require that you allow visitation or contact between the child and his or her parents. The child's needs often require that the parent-child relationship be maintained, within reason. However, the court may place restrictions on the visits, such as the requirement of supervision. The court may also impose other conditions in the child's best interest.
- i. Driver's license** - As guardian of the person, you have the authority to consent to the minor's application for a driver's license. If you consent, you will become liable for any civil damages that may result if the minor causes an accident. The law requires that anyone signing the DMV application obtain insurance to cover the minor.
- j. Enlistment in the armed services** - The guardian may consent to a minor's enlistment in the armed services. If the minor enters into active duty with the armed forces, the minor becomes emancipated under California law.
- k. Marriage** - For the minor to marry, the guardian **and the court** must give permission. If the minor enters a valid marriage, the minor becomes emancipated under California law.
- l. Change of address** - A guardian must notify the court in writing of any change in the address of either the child or the guardian. This includes any changes that result from the child's leaving the guardian's home or returning to the parent's home. You **must** always obtain **court permission** before you move the child to another state or country.
- m. Court visitors and status reports** - Some counties have a program in which "court visitors" track and review guardianships. If your county has such a program, you will be expected to cooperate with all requests of the court visitor. As guardian, you may also be required to fill out and file status reports. In all counties, you must cooperate with the court and court investigators.
- n. Misconduct of the child** - A guardian, like a parent, is liable for the harm and damages caused by the willful misconduct of a child. There are special rules concerning harm caused by the use of a firearm. If you are concerned about your possible liability, you should consult an attorney.
- o. Additional responsibilities** - The court may place other conditions on the guardianship or additional duties upon you, as guardian. For example, the court may require the guardian to complete counseling or parenting classes, to obtain specific services for the child, or to follow a scheduled visitation plan between the child and the child's parents or relatives. As guardian, you must follow all court orders.

(Continued on page three)

GUARDIAN OF (Name):

MINOR

CASE NUMBER:

- p. Termination of guardianship of the person-** A guardianship of the person automatically ends when the child reaches the age of 18, is adopted, marries, is emancipated by court order, enters into active military duty, or dies. If none of these events has occurred, the child, a parent, or the guardian may petition the court for termination of guardianship. But it must be shown that the guardianship is no longer necessary or that termination of the guardianship is in the child's best interest.

## 2. GUARDIANSHIP OF THE ESTATE

If the court appoints you as *guardian of the child's estate*, you will have additional duties and obligations. The money and other assets of the child are called the child's "estate." Appointment as guardian of a child's estate is taken very seriously by the court. The guardian of the estate is required to manage the child's funds, collect and make an inventory of the assets, keep accurate financial records, and regularly file financial accountings with the court.

### MANAGING THE ESTATE

- a. Prudent investments -** As guardian of the estate, you must manage the child's assets with the care of a prudent person dealing with someone else's property. This means that you must be cautious and may not make speculative or risky investments.
- b. Keeping estate assets separate-** As guardian of the estate, you must keep the money and property of the child's estate separate from everyone else's, including your own. When you open a bank account for the estate, the account name must indicate that it is a *guardianship* account and not your personal account. You should use the child's social security number when opening estate accounts. You should never deposit estate funds in your personal account or otherwise mix them with your own funds or anyone else's funds, even for brief periods. Securities in the estate must be held in a name that shows that they are estate property and not your personal property.
- c. Interest-bearing accounts and other investments-** Except for checking accounts intended for ordinary expenses, you should place estate funds in interest-bearing accounts. You may deposit estate funds in insured accounts in federally insured financial institutions, but you should not put more than \$100,000 in any single institution. You should consult with an attorney before making other kinds of investments.
- d. Blocked accounts -** A *blocked account* is an account with a financial institution in which money is placed. No person may withdraw funds from a blocked account without the court's permission. Depending on the amount and character of the child's property, the guardian may **elect the court may require** that estate assets be placed in a blocked account. As guardian of the estate, you must follow the directions of the court and the procedures required to deposit funds in this type of account. The use of a blocked account is a safeguard and may save the estate the cost of a bond.
- e. Other restrictions -** As guardian of the estate, you will have many other restrictions on your authority to deal with estate assets. Without prior court order, you **may not** pay fees to yourself or your attorney. You may not make a gift of estate assets to anyone. You may not borrow money from the estate. As guardian, you may not use estate funds to purchase real property without a prior court order. If you do not obtain the court's permission to spend estate funds, you may be compelled to reimburse the estate from your own personal funds and may be removed as guardian. You should consult with an attorney concerning the legal requirements relating to sales, leases, mortgages, and investment of estate property. If the child of whose estate you are the guardian has a living parent or if that child receives assets or is entitled to support from another source, you must obtain court approval before using guardianship assets for the child's support, maintenance, or education. You must file a petition or include a request for approval in the original petition, and set forth which exceptional circumstances justify any use of guardianship assets for the child's support. The court will ordinarily grant such a petition for only a limited period of time, usually not to exceed one year, and only for specific and limited purposes.

### INVENTORY OF ESTATE PROPERTY

- f. Locate the estate's property -** As guardian of the estate, you must locate, take possession of, and protect the child's income and assets that will be administered in the estate. You must change the ownership of all assets into the guardianship estate's name. For real estate, you should record a copy of your *Letters of Guardianship* with the county recorder in each county where the child owns real property.

(Continued on reverse)



GUARDIAN OF (Name):	MINOR	CASE NUMBER:
---------------------	-------	--------------

If you are not represented by an attorney, you may obtain answers to your questions by contacting community resources, private publications, or your local law library.

**NOTICE: This statement of duties is a summary and is not a complete statement of the law. Your conduct as a probate guardian is governed by the law itself and not by this summary.**

**ACKNOWLEDGMENT OF RECEIPT**

1. I have petitioned the court to be appointed as a guardian.
2. I acknowledge that I have received a copy of this statement of the duties of the position of guardian.

Date:

(TYPE OR PRINT NAME)	▶	(SIGNATURE OF PETITIONER)
----------------------	---	---------------------------

Date:

(TYPE OR PRINT NAME)	▶	(SIGNATURE OF PETITIONER)
----------------------	---	---------------------------

Date:

(TYPE OR PRINT NAME)	▶	(SIGNATURE OF PETITIONER)
----------------------	---	---------------------------



GUARDIANSHIP OF (Name):  <div style="text-align: right; padding-right: 20px;">MINOR</div>	CASE NUMBER:  
---	----------------------

10. Have you, or has any other person living in your home, been charged with, arrested for, or convicted of a crime involving illegal substances or alcohol?  
 Yes     No    *(If you checked "Yes," explain in Attachment 10.)*
11. Do you or does any other person living in your home suffer from mental illness?  
 Yes     No    *(If you checked "Yes," explain in Attachment 11.)*
12. Do you suffer from any physical disability that would impair your ability to perform the duties of guardian?  
 Yes     No    *(If you checked "Yes," explain in Attachment 12.)*
13.  I have or may have     I do not have    an adverse interest that the court may consider to be a risk to, or to have an effect on, my ability to faithfully perform the duties of guardian.  
*(If you checked "I have or may have," explain in Attachment 13.)*
14.  I have     I have not    previously been appointed guardian, conservator, executor, or fiduciary in another proceeding.  
*(If you checked "I have," explain in Attachment 14.)*
15.  I have     I have not    been removed as guardian, conservator, executor, or fiduciary in any other proceeding.  
*(If you checked "I have," explain in Attachment 15.)*
16.  I am     I am not    a private professional fiduciary, as defined in Business and Professions Code section 6501(f).  
*(If you checked "I am," respond to item 17. If you checked "I am not," go to item 18.)*
17.  I am     I am not    currently licensed by the Professional Fiduciaries Bureau of the Department of Consumer Affairs. My license status and information is stated in item 1 on page 1 of the Professional Fiduciary Attachment signed by me and attached to the petition that proposes my appointment as guardian in this matter. *(Complete and sign the Professional Fiduciary Attachment and attach it to the petition, or deliver it to the petitioner for attachment, before the petition is filed. See item 4d of the petition. Use form GC-210(A-PF)/GC-310(A-PF) for this attachment.)*
18.  I am     I am not    a responsible corporate officer authorized to act for *(name of corporation):*
- a California nonprofit charitable corporation that meets the requirements for appointment as guardian of the proposed ward under Probate Code section 2104. I certify that the corporation's articles of incorporation specifically authorize it to accept appointments as guardian. *(If you checked "I am," explain the circumstances of the corporation's care of, counseling of, or financial assistance to the proposed ward in Attachment 18.)*
19.  I have     I have not    filed for bankruptcy protection within the last 10 years.  
*(If you checked "I have," explain in Attachment 19.)*

<b>MINORS' CONTACT INFORMATION</b>		
20. Minor's name:	School (name):	
Home telephone:	School telephone:	Other telephone:
21. Minor's name:	School (name):	
Home telephone:	School telephone:	Other telephone:
22. Minor's name:	School (name):	
Home telephone:	School telephone:	Other telephone:
<input type="checkbox"/> Information on additional minors is attached.		

**DECLARATION**

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

_____ (TYPE OR PRINT NAME OF PROPOSED GUARDIAN)	▶	_____ (SIGNATURE OF PROPOSED GUARDIAN)*
--	---	--

\* Each proposed guardian must fill out and file a separate screening form.

**CONFIDENTIAL GUARDIAN SCREENING FORM**  
**Additional Page**

**CASE NUMBER:** \_\_\_\_\_

**HEARING DATE:** \_\_\_\_\_

The Probate Court assigns an Investigator to all Guardianship petitions. The Investigator will use the information on this page to gather background information related to your petition. You must fully disclose all of the requested information to help expedite your case. Include all names that every person listed below has ever used.

1. Proposed guardian's name:
2. Proposed guardian's employer and address and telephone number of employment:
3. Name of proposed guardian's ~ spouse ~ partner:
4. Name of all people residing in the proposed guardian's household:

Name:      Birthdate:      Relationship

to proposed guardian:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Check here if you need more space. Put all additional information on Form MC-020.

5. Name, address, telephone number and date of birth for minor's mother :
6. Name, address, telephone number and date of birth for each minor's father:

\*Each proposed guardian must fill out and file a separate screening form additional page.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):  <hr/> TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b>  STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: _____ (This section applies only to family law cases.) RESPONDENT: OTHER PARTY:	
GUARDIANSHIP OF (Name): _____ (This section applies only to guardianship cases.)	CASE NUMBER: _____  Minor
<b>DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)</b>	

1. **I am a party** to this proceeding to determine custody of a child.
2.  My present address and the present address of each child residing with me is confidential under Family Code section 3429 as I have indicated in item 3.
3. There are (specify number): \_\_\_\_\_ minor children who are subject to this proceeding, as follows:  
**(Insert the information requested below. The residence information must be given for the last FIVE years.)**

a. Child's name	Place of birth	Date of birth	Sex
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with (name and complete current address) <input type="checkbox"/> Confidential	Relationship
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
b. Child's name	Place of birth	Date of birth	Sex
<input type="checkbox"/> Residence information is the same as given above for child a. (If NOT the same, provide the information below.)			
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with (name and complete current address) <input type="checkbox"/> Confidential	Relationship
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
to	Child's residence (City, State)	Person child lived with (name and complete current address)	

- c.  Additional residence information for a child listed in item a or b is continued on attachment 3c.
- d.  Additional children are listed on form FL-105(A)/GC-120(A). (Provide all requested information for additional children.)

SHORT TITLE: _____	CASE NUMBER: _____
-----------------------	-----------------------

4. Do you have information about, or have you participated as a party or as a witness or in some other capacity in, another court case or custody or visitation proceeding, in California or elsewhere, concerning a child subject to this proceeding?

Yes  No (If yes, attach a copy of the orders (if you have one) and provide the following information):

Proceeding	Case number	Court (name, state, location)	Court order or judgment (date)	Name of each child	Your connection to the case	Case status
a. <input type="checkbox"/> Family						
b. <input type="checkbox"/> Guardianship						
c. <input type="checkbox"/> Other						

Proceeding	Case Number	Court (name, state, location)
d. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency		
e. <input type="checkbox"/> Adoption		

5.  One or more domestic violence restraining/protective orders are now in effect. (Attach a copy of the orders if you have one and provide the following information):

Court	County	State	Case number (if known)	Orders expire (date)
a. <input type="checkbox"/> Criminal				
b. <input type="checkbox"/> Family				
c. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency				
d. <input type="checkbox"/> Other				

6. Do you know of any person who is not a party to this proceeding who has physical custody or claims to have custody of or visitation rights with any child in this case?  Yes  No (If yes, provide the following information):

a. Name and address of person	b. Name and address of person	c. Name and address of person
<input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights	<input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights	<input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights
Name of each child	Name of each child	Name of each child

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: \_\_\_\_\_

\_\_\_\_\_ ▶ \_\_\_\_\_  
 (TYPE OR PRINT NAME) (SIGNATURE OF DECLARANT)

7.  Number of pages attached: \_\_\_\_\_

**NOTICE TO DECLARANT: You have a continuing duty to inform this court if you obtain any information about a custody proceeding in a California court or any other court concerning a child subject to this proceeding.**

CHILD'S NAME: _____	CASE NUMBER: _____
------------------------	-----------------------

1. Name of child:

Indian child inquiry  made  not made and (check all that apply):

- a.  The child is or may be a member of or eligible for membership in a tribe.  
Name of tribe(s): \_\_\_\_\_  
Name of band (if applicable): \_\_\_\_\_
- b.  The child's parents, grandparents, or great-grandparents are or were members of a tribe.  
Name of tribe(s): \_\_\_\_\_  
Name of band (if applicable): \_\_\_\_\_
- c.  The residence or domicile of the child, child's parents, or Indian custodian is in a predominantly Indian community.
- d.  The child or the child's family has received services or benefits from a tribe or services that are available to Indians from tribes or the federal government, such as the Indian Health Service or Tribal Temporary Assistance to Needy Families (TANF).
- e.  The child may have Indian ancestry.
- f.  The child has no known Indian ancestry.
- g.  Other reason to know the child may be an Indian child: \_\_\_\_\_

Person(s) questioned:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, state, zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Date questioned: \_\_\_\_\_

Means of communication: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Summary of information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Person(s) questioned:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, state, zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Date questioned: \_\_\_\_\_

Means of communication: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Summary of information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- h.  Information about other persons questioned is attached.

2. If this is a delinquency proceeding under Welfare and Institutions Code, § 601 or 602:

- The child is in foster care.
- It is probable the child will be entering foster care.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

\_\_\_\_\_

(TYPE OR PRINT NAME)

▶

\_\_\_\_\_

(SIGNATURE)



GUARDIANSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (name):	CASE NUMBER:
---	--------------

**THE COURT ORDERS**

8. a.  (name):  
(address): (telephone):

is appointed guardian of the PERSON of (name):  
and *Letters* shall issue upon qualification.

- b. (Not applicable to a proposed ward 18 years of age or older.)  
 (name):  
(address): (telephone):

is appointed guardian of the ESTATE of (name):  
and *Letters* shall issue upon qualification.

- c.  The appointment of  
(name):  
(address): (telephone):

as guardian of the PERSON of (name):  
is extended past the ward's 18th birthday and new *Letters* shall issue forthwith.

9.  Notice of hearing to the persons named in item 2b is dispensed with.

10. a.  Bond is not required.  
b.  Bond is fixed at: \$ to be furnished by an authorized surety company or as otherwise provided by law.  
c.  Deposits of: \$ are ordered to be placed in a blocked account at (specify institution and location):

and receipts shall be filed. No withdrawals shall be made without a court order.

Additional orders in Attachment 10c.

- d.  The guardian is not authorized to take possession of money or any other property without a specific court order.

11.  For legal services rendered on behalf of the (proposed) ward,  the parents of the (proposed) ward  
 the (proposed) ward's estate shall pay to (name):  
the sum of: \$  
 forthwith  as follows (specify terms, including any combination of payers):

12.  The guardian of the estate is granted authorization under Probate Code section 2590 to exercise independently the powers specified in Attachment 12  subject to the conditions provided.

13.  Orders are granted relating to the powers and duties of the guardian of the person under Probate Code sections 2351–2358 as specified in Attachment 13.

GUARDIANSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF <i>(name):</i>	CASE NUMBER:
--	--------------

- 14.  Orders are granted relating to the conditions imposed under Probate Code section 2402 upon the guardian of the estate as specified in Attachment 14.
- 15.  Other orders as specified in Attachment 15 are granted.
- 16.  The probate referee appointed is *(name and address)*:

17. Number of boxes checked in items 9–16: \_\_\_\_\_

18. Number of pages attached: \_\_\_\_\_

Date:

---

JUDGE OF THE SUPERIOR COURT

SIGNATURE FOLLOWS LAST ATTACHMENT

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NO.: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
GUARDIANSHIP OF (name):	
<b>LETTERS OF GUARDIANSHIP</b> <input type="checkbox"/> Person <input type="checkbox"/> Estate	CASE NUMBER:

**LETTERS**

1.  (Name): \_\_\_\_\_ is appointed guardian of the  person  estate  
 of (name): \_\_\_\_\_
  
2.  The appointment of (name): \_\_\_\_\_ as guardian of the person of  
 (name): \_\_\_\_\_  
 is extended past the ward's 18th birthday as of (date): \_\_\_\_\_
  
3.  Other powers have been granted and conditions have been imposed as follows:
  - a.  Powers to be exercised independently under Probate Code section 2590 are specified in attachment 3a (specify powers, restrictions, conditions, and limitations).
  - b.  Conditions relating to the care and custody of the property under Probate Code section 2402 are specified in attachment 3b.
  - c.  Conditions relating to the care, treatment, education, and welfare of the ward under Probate Code section 2358 are specified in attachment 3c.
  - d.  Other powers granted or conditions imposed are  specified on attachment 3d  specified below.
  
4.  The guardian is not authorized to take possession of money or any other property without a specific court order.
5. The guardianship of the person terminates by operation of law on (date): \_\_\_\_\_
6. Number of pages attached: \_\_\_\_\_

WITNESS, clerk of the court, with seal of the court affixed.

(SEAL)

Date: \_\_\_\_\_

Clerk, by \_\_\_\_\_, Deputy

GUARDIANSHIP OF  
(name):

CASE NUMBER:

**NOTICE TO INSTITUTIONS AND FINANCIAL INSTITUTIONS**  
(Probate Code sections 2890–2893)

When these *Letters of Guardianship* (Letters) are delivered to you as an employee or other representative of an *institution* or *financial institution* (described below) in order for the guardian of the estate (1) to take possession or control of an asset of the minor named above held by your institution (including changing title, withdrawing all or any portion of the asset, or transferring all or any portion of the asset) or (2) to open or change the name of an account or a safe-deposit box in your financial institution to reflect the guardianship, you must fill out Judicial Council form GC-050 (for an institution) or form GC-051 (for a financial institution). An officer authorized by your institution or financial institution must date and sign the form, and you must file the completed form with the court.

There is no filing fee for filing the form. You may either arrange for personal delivery of the form or mail it to the court for filing at the address given for the court on page 1 of these Letters.

The guardian should deliver a blank copy of the appropriate form to you with these Letters, but it is your institution's or financial institution's responsibility to complete the correct form, have an authorized officer sign it, and file the completed form with the court. If the correct form is not delivered with these Letters or is unavailable for any other reason, blank copies of the forms may be obtained from the court. The forms may also be accessed from the judicial branch's public website free of charge. The Internet address (URL) is [www.courts.ca.gov/forms.htm](http://www.courts.ca.gov/forms.htm). Select the form group *Probate—Guardianships and Conservatorships* and scroll down to form GC-050 for an institution or form GC-051 for a financial institution. The forms may be printed out as blank forms and filled in by typewriter (nonfillable form) or may be filled out online and printed out ready for signature and filing (fillable form).

An *institution* under California Probate Code section 2890(c) is an insurance company, insurance broker, insurance agent, investment company, investment bank, securities broker-dealer, investment advisor, financial planner, financial advisor, or any other person who takes, holds, or controls an asset subject to a conservatorship or guardianship other than a financial institution. Institutions must file a *Notice of Taking Possession or Control of an Asset of Minor or Conservatee* (form GC-050) for an asset of the minor or conservatee held by the institution. A single form may be filed for all affected assets held by the institution.

A *financial institution* under California Probate Code section 2892(b) is a bank, trust (including a Totten trust account but excluding other trust arrangements described in Probate Code section 82(b)), savings and loan association, savings bank, industrial bank, or credit union. Financial institutions must file a *Notice of Opening or Changing a Guardianship or Conservatorship Account or Safe-Deposit Box* (form GC-051) for an account or a safe-deposit box held by the financial institution. A single form may be filed for all affected accounts or safe-deposit boxes held by the financial institution.

**LETTERS OF GUARDIANSHIP**

**AFFIRMATION**

I solemnly affirm that I will perform according to law the duties of guardian.

Executed on (date): \_\_\_\_\_, at (place): \_\_\_\_\_

\_\_\_\_\_  
(TYPE OR PRINT NAME)

\_\_\_\_\_  
(SIGNATURE OF APPOINTEE)

**CERTIFICATION**

I certify that this document, including any attachments, is a correct copy of the original on file in my office, and that the Letters issued to the person appointed above have not been revoked, annulled, or set aside, and are still in full force and effect.

(SEAL)

Date:

Clerk, by \_\_\_\_\_, Deputy