



Petition for Guardianship of Person Only (Step 2)

Now that you have filed the petition for guardianship, you must complete the remaining tasks before the court can appoint a guardian. The tasks include noticing all of the minor's relatives, responding to calendar notes, and preparing for the hearing. Depending on your case, there may be other tasks.

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 or on the web at <http://www.leginfo.ca.gov/calaw.html>.

ASSISTANCE

If you do not have an attorney, the Self Help Center may be able to help you complete the next step. To use the Self Help Center, start at the Information Booth just past the security checkpoint on the first floor.

PROBATE CALENDAR NOTES

Refer to "**Instructions for Probate Calendar Notes**" provided in this packet for directions on clearing Probate Calendar Notes.

SERVICE

Refer to "**Service of Petition and Notice of Hearing**" provided in this packet for specific instructions on service (providing copies of documents to people affected by the proposed court action).

COMPLETE THE ATTACHED FORMS

GC-020 – Notice of Hearing – Guardianship or Conservatorship;

PR/E-LP-010 – Declaration of Diligent Search (use if you could not serve everyone who should have received notice of the proceedings, see the attached instructions);

GC-211 – Consent of Proposed Guardian, Nomination of Guardian, and Consent to Appointment of Guardian and Waiver of Notice (necessary when the proposed guardian is not the petitioner or relatives of the minor consent to appointment of the proposed guardian and wish to waive their right to notice) ;and

PR-E-LP-022– Blank Response to Calendar Notes Form used to respond to any Probate Calendar Notes or provide other information to the Court (see the attached instructions).



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.



INSTRUCTIONS FOR: CONSENT OF PROPOSED GUARDIAN, NOMINATION OF GUARDIAN, AND CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE

The "Consent of Proposed Guardian, Nomination of Guardian, and Consent to Appointment of Guardian and Waiver of Notice" (**GC-211**) is used by the proposed guardian to consent to be the guardian of the minor, and for relatives of the minor to consent to the appointment of the guardian and to waive the right to notice in this matter. This form can be used for one or all of these actions.

- If the petitioner is not the proposed guardian, the proposed guardian must complete the "Consent of Proposed Guardian, Nomination of Guardian, and Consent to Appointment of Guardian and Waiver of Notice" (**GC-211**) as follows:

- Print your name, address, and telephone number in the top box of the form.
- Check the boxes for CONSENT OF PROPOSED GUARDIAN
- Date, print, and sign your name in the appropriate places in Item 1.

File the completed form with a copy at the Probate Front Counter in Room 214 on the second floor of the Family Relations Court.

- If one or more relatives of the minor consents to the petition for guardianship, complete the "Consent of Proposed Guardian, Nomination of Guardian, and Consent to Appointment of Guardian and Waiver of Notice" (**GC-211**) as follows:

- Print your name, address, and telephone number in the top box of the form.
- Check the box for CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE.
- Print the date the Petition for Appointment of Guardian of Minor (GC-210) was filed in the appropriate box.
- Consenting relative(s) of the minor must date, print their name, sign and print their relationship to the minor in item 4 for the waiver of service to be valid. This form must be signed and dated after the date of filing the petition..

File the completed form with a copy at the Probate Front Counter in Room 214 on the second floor of the Family Relations Court.

You are not required to serve Notice to any relatives who correctly completed this form and signed and dated it after the petition was filed.



INSTRUCTIONS FOR PROBATE CALENDAR NOTES

REQUIRED: You must clear the Probate Calendar Notes and file all necessary documents with the Probate Front Counter in Room 214 at the William R. Ridgeway Family Relations Courthouse at least **five (5) court days** before your hearing or the Court will continue or dismiss your case.

1. Check for the Probate Calendar Notes at least ten (10) days prior to the hearing.
2. You can view the Probate Calendar Notes online at <https://services.saccourt.com/publicdms2/DefaultDMS.aspx>. Search the notes by using your case number or the hearing date. If you search by the hearing date, you will also need the Department number. The Sacramento Superior Court holds most probate hearings in Department 129 at the William R. Ridgeway Family Relations Courthouse.
3. You need to respond to any notes that say "NEEDED" so that the matter can be submitted as "RFA", "Recommended of Approval". If you need to respond to a question by the court, use local form Response to Calendar Notes (PR-E-LP-022). The person who makes the declaration must sign and date the PR-E-LP-022 form. Make two copies of the completed and signed form. File the original form and submit the copies at the Probate Front Counter in Room 214 at the William R. Ridgeway Family Relations Courthouse. The court will keep the original and one copy and return one endorsed copy to you. Bring the endorsed copy to all Court hearings.
4. The Staff Attorney may be contacted (FOR CALENDARED MATTERS ONLY, AFTER CALENDAR NOTES ARE POSTED) either by telephone at (916) 875-3400 or at their office at 3341 Power Inn Road, Room 214 2nd floor, Sacramento, CA. 95826, between 8:30 a.m. and NOON.



SERVICE OF PETITION AND NOTICE OF HEARING

Until you have served all of the relatives listed below, you will not be able to proceed with your guardianship case.

At least 15 days prior to the date of the hearing, have an adult other than you who is not one of the people listed below **PERSONALLY** serve a copy of the Petition for Guardianship and Notice of hearing on:

- The Mother of the minor;
- The Father of the minor;
- The Minor (12 or older); and/or
- Any person who has the minor in their care pursuant to a court order.

The server must complete the "Proof of Personal Service of Notice of Hearing" (**GC-20(P)**). In addition, the server must date and sign the bottom of the form.

At least 15 days prior to the date of the hearing, have an adult other than you who is not one of the people listed below **MAIL** a copy of the Petition for Guardianship and Notice of Hearing to:

- The Maternal Grandparents of the minor;
- The Paternal Grandparents of the minor;
- The Sisters (12 or older) of the minor;
- The Brothers (12 or older) of the minor; and/or
- Any person who has the minor in their care but has not been awarded custody by a court order.

The server must complete the "Notice of Hearing" (**GC-20**). In addition, the server must date and sign the bottom of the form and list the parties served.

At least three court days before the hearing, go to the Probate Front Counter in Room 214 on the second floor of the William R. Ridgeway Family Relations Court and file the Proofs of Service and a copy of each document with the clerk.

If you do not know the name or address of the person to serve or cannot locate the person, you must complete and file a "Declaration of Diligent Search" (**PR/E-LP-010**) for each person you cannot locate. You must complete each section of the form describing the efforts you made to identify and/or locate the person for service of notice. Failure to complete the entire form will result in a continuance of your case.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): <hr/> <p style="text-align: center;">TELEPHONE NO.: _____ FAX NO. (Optional): _____</p> <p>E-MAIL ADDRESS (Optional): _____</p> <p>ATTORNEY FOR (Name): _____</p>	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
<input type="checkbox"/> GUARDIANSHIP <input type="checkbox"/> CONSERVATORSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (Name): <div style="text-align: right;"><input type="checkbox"/> MINOR <input type="checkbox"/> (PROPOSED) CONSERVATEE</div>	
NOTICE OF HEARING—GUARDIANSHIP OR CONSERVATORSHIP	CASE NUMBER: _____

This notice is required by law.
This notice does not require you to appear in court, but you may attend the hearing if you wish.

1. NOTICE is given that (name):
 (representative capacity, if any):
 has filed (specify):

2. You may refer to documents on file in this proceeding for more information. (Some documents filed with the court are confidential. Under some circumstances you or your attorney may be able to see or receive copies of confidential documents if you file papers in the proceeding or apply to the court.)

3. The petition includes an application for the independent exercise of powers by a guardian or conservator under Probate Code section 2108 Probate Code section 2590.
 Powers requested are specified below specified in Attachment 3.

4. A HEARING on the matter will be held as follows:

a. Date: _____ Time: _____ Dept.: _____ Room: _____

b. Address of court same as noted above is (specify): _____

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available upon request if at least 5 days notice is provided. Contact the clerk's office for *Request for Accommodations by Persons with Disabilities and Order* (form MC-410). (Civil Code section 54.8.)



<input type="checkbox"/> ESTATE <input type="checkbox"/> GUARDIANSHIP <input type="checkbox"/> CONSERVATORSHIP <input type="checkbox"/> MATTER OF	CASE NUMBER:
(Name):	

ATTACHMENT TO NOTICE OF HEARING PROOF OF SERVICE BY MAIL

(This Attachment is for use with forms DE-120 and GC-020.)

NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED

<u>No.</u>	<u>Name of person served</u>	<u>Address (number, street, city, state, and zip code)</u>
—		
—		
—		
—		
—		
—		
—		
—		
—		
—		
—		
—		
—		
—		

<input type="checkbox"/> GUARDIANSHIP <input type="checkbox"/> CONSERVATORSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (Name): _____ <div style="text-align: center;"> <input type="checkbox"/> MINOR <input type="checkbox"/> (PROPOSED) CONSERVATEE </div>	CASE NUMBER: _____
--	--------------------

PROOF OF PERSONAL SERVICE OF NOTICE OF HEARING—GUARDIANSHIP OR CONSERVATORSHIP

(Attach a separate completed and signed copy of this form or other proof of personal service to Notice of Hearing—Guardianship or Conservatorship for each person who personally served a copy of the Notice.)

1. I am over the age of 18 and not a party to this cause.
2. I served the attached *Notice of Hearing—Guardianship or Conservatorship* by personally delivering a copy to each person listed below at the address and on the date and time indicated below.
3. I served with the attached *Notice of Hearing—Guardianship or Conservatorship* a copy of the petition or other document referred to in the Notice.
4. I served with the attached *Notice of Hearing—Guardianship or Conservatorship* copies of the following documents *(specify)*:

Continued on Attachment 4.

5. I am *(check all that apply)*:
 - a. not a registered California process server.
 - b. a California sheriff or marshal.
 - c. a registered California process server.
 - d. an employee or independent contractor of a registered California process server.
 - e. exempt from registration (Bus. & Prof. Code, § 22350(b)).
6. My name, address, telephone number, and, if applicable, county of registration and number, are *(specify)*:

NAME OF EACH PERSON PERSONALLY SERVED, ADDRESS WHERE SERVED, AND DATE AND TIME SERVICE WAS MADE

	<u>Name</u>	<u>Address where served (number, street, city, and state)</u>	<u>Date and time service made</u>
1.			Date: _____ Time: _____
2.			Date: _____ Time: _____
3.			Date: _____ Time: _____
4.			Date: _____ Time: _____

List of names and addresses of persons personally served by the undersigned continued on an attachment. *(You may use Attachment to Notice of Hearing Proof of Personal Service, form DE-120(PA)/GC-020(PA), for this purpose.)*

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

(For California sheriff or marshal use only)
I certify that the foregoing is true and correct

Date: _____

Date: _____

▶ _____

▶ _____

(SIGNATURE)

(SIGNATURE)

ATTORNEY OR <u>PARTY WITHOUT ATTORNEY</u> (Name and Address): Telephone No.: _____ FAX No.: _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY Case Number: _____ Hearing Date: _____
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SACRAMENTO Street Address: 3341 Power Inn Road Mailing Address: 3341 Power Inn Road City and Zip Code: Sacramento, CA 95826 BRANCH NAME: WM RIDGEWAY FAMILY RELATIONS COURTHOUSE	
<input type="checkbox"/> GUARDIANSHIP <input type="checkbox"/> CONSERVATORSHIP <input type="checkbox"/> ESTATE OF: (NAME): _____	Case Number: _____ Hearing Date: _____
DECLARATION OF DILIGENT SEARCH AND REQUEST TO DISPENSE WITH NOTICE	

Name of the person I need to give notice to is: _____

The last known address for this person is: _____

The approximate date when the person named above was last known to reside there was: _____

Guardianship only: The relationship between this person and the child(ren) in this case is: _____

Conservatorship only: The relationship between this person and the conservatee is: _____

Estate only: The relationship between this person and the decedent is: _____

My attempts to locate include the following:

1. I contacted the following relatives of the person named above:

Name and Relationship to Person Named Above Address and Telephone Number _____

Name and Relationship to Person Named Above Address and Telephone Number _____

Name and Relationship to Person Named Above Address and Telephone Number _____

Results of interview and additional information received:

2. I contacted the following friends and acquaintances of the person named above:

Name and Relationship to Person Named Above Address and Telephone Number _____

Name and Relationship to Person Named Above Address and Telephone Number _____

Name and Relationship to Person Named Above Address and Telephone Number _____

Results of interview and additional information received:

3. I contacted the following employers of the person named above:

Name and Title Business Name, Address and Telephone Number Dates of Employment

Case Name:	Case Number:
------------	--------------

Results of interview and additional information received:

4. I reviewed the city telephone directories of _____ and contacted directory assistance on _____.
- City & State
- Date

Results/additional information received:

5. I searched the real and personal property indexes in the Recorder's and Assessor's Offices of _____ County on _____.
- County Name
- Date

Results/additional information received:

6. I conducted an Internet search on _____, on _____.
- Location
- Date

Results/additional information received:

7. I contacted the applicable criminal justice agency (such as California Department of Corrections Locator Service at (916) 445-6713), on _____.
- Date

Results/additional information received:

8. Other relevant information:

Despite my diligent efforts, I have not been able to find _____ and therefore ask the Court permission to dispense with notice to _____

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

Dated: _____

Signature

Print Name: _____

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): <hr/> <p style="text-align: center;">TELEPHONE NO.: _____ FAX NO. (<i>Optional</i>): _____</p> <p style="text-align: center;">E-MAIL ADDRESS (<i>Optional</i>): _____</p> <p style="text-align: center;">ATTORNEY FOR (<i>Name</i>): _____</p>	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
GUARDIANSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (<i>Name</i>):	
<input type="checkbox"/> CONSENT OF PROPOSED GUARDIAN <input type="checkbox"/> NOMINATION OF GUARDIAN <input type="checkbox"/> CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE	CASE NUMBER:

CONSENT OF PROPOSED GUARDIAN

1. I consent to serve as guardian of the person estate of the minor.

Date: _____

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

NOMINATION OF GUARDIAN

2. I am a parent of the minor a donor of a gift to the minor. I nominate (*name and address*):

as guardian of the person estate of the minor.

3. I am a parent of the minor a donor of a gift to the minor. I nominate (*name and address*):

as guardian of the person estate of the minor.

Date: _____

_____ ▶ _____
 (TYPE OR PRINT NAME) (SIGNATURE)

NOTICE: The guardian of the person of a minor child has full legal and physical custody until the child becomes an adult or is adopted, the court changes guardians, or the court terminates the guardianship. Parents or other interested persons must petition the court to terminate the guardianship. The court will not do so unless the judge decides that termination would be in the child's best interest.

CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE

4. I consent to appointment of the guardian as requested in the *Petition for Appointment of Guardian of Minor*, filed on (*date*): . I am entitled to notice in this proceeding, but I waive notice of hearing of the petition, including notice of any request for independent powers contained in it. I waive timely receipt of a copy of the petition.

DATE	(TYPE OR PRINT NAME)	▶	(SIGNATURE)	RELATIONSHIP TO MINOR
DATE	(TYPE OR PRINT NAME)	▶	(SIGNATURE)	RELATIONSHIP TO MINOR
DATE	(TYPE OR PRINT NAME)	▶	(SIGNATURE)	RELATIONSHIP TO MINOR

Continued on Attachment 4.

PARTY WITHOUT ATTORNEY OR ATTORNEY (Name, state bar number, and address) TELEPHONE AND FAX NOS:	FOR COURT USE ONLY
ATTORNEY FOR (Name): <input type="checkbox"/> ESTATE OF <input type="checkbox"/> GUARDIANSHIP OF <input type="checkbox"/> CONSERVATORSHIP OF (Name): <input type="checkbox"/> DECEDENT <input type="checkbox"/> MINOR <input type="checkbox"/> CONSERVATEE	
RESPONSE TO CALENDAR NOTES (Local Rule 4.01(B))	CASE NUMBER:

DATE:	TIME:	DEPT:
-------	-------	-------

1 1st Calendar Note:

2

3

4

5

6 Response:

7

8

9

10

11

12

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)

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

13 2nd Calendar Note:

14

15

16

17 Response:

18

19

20

21 3rd Calendar Note:

22

23

24

25 Response:

26

27

28

29 4th Calendar Note:

30

31

32

33 Response:

34

35

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)

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

36 5th Calendar Note:

37

38

39

40 Response:

41

42

43

44 6th Calendar Note:

45

46

47

48 Response:

49

50

51

52 7th Calendar Note:

53

54

55

56 Response:

57

58

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)