

Petition for the Appointment of a Guardian and/or Conservator for a Proposed Ward

INSTRUCTIONS

I. Specific Instructions

1. This form is to be used for filing a Petition for the Appointment of a Guardian and/or Conservator for a Proposed Ward pursuant to O.C.G.A. §29-4-10 and O.C.G.A. §29-5-10.
2. In any case involving the creation of a conservatorship when the proposed ward owns real property, a certificate of creation of conservatorship will be completed by the clerk of the probate court and filed with the clerk of the superior court of each county of this state in which the proposed ward owns real property within 30 days of the date of such order.
3. The burden of proof is on the petitioner to present clear and convincing evidence that the proposed ward lacks sufficient capacity to make or communicate significant responsible decisions concerning his or her health or safety and is in need of a guardianship and/or that the proposed ward lacks sufficient capacity to make or communicate significant responsible decisions concerning the management of his or her property and is in need of a conservatorship.
4. According to Probate Court Rule 5.6 (A), unless the court specifically assumes the responsibility, it is the responsibility of the moving party to prepare the proper citation and deliver it properly so it can be served according to law. Pages after 15 which are labeled "Court" are to be completed by the moving party, unless otherwise directed by the court.

II. General Instructions

General instructions applicable to all Georgia probate court standard forms are available in each probate court.

PROBATE COURT OF _____ COUNTY

STATE OF GEORGIA

IN RE:	)	ESTATE NO. _____
_____	)	PETITION FOR APPOINTMENT OF
PROPOSED WARD	)	A GUARDIAN AND/OR
	)	CONSERVATOR FOR A
	)	PROPOSED WARD

TO THE HONORABLE JUDGE OF THE PROBATE COURT:

[NOTE: Unless there are two or more petitioners, the affidavit on page 9 must be completed by a physician, psychologist, or licensed clinical social worker based upon an examination within 15 days prior to the filing of this petition.]

1.

Petitioner, _____, is the
 (relationship) _____ of the proposed ward, and is
 domiciled at (address) _____
 _____ County of _____, State of
 _____, telephone number _____, and

(Initial either a. or b. below):

____ a. (Second Petitioner, if any) _____, is
 the (relationship) _____ of the proposed ward, and is domiciled at
 (address) _____
 _____, County of _____, State
 of _____ telephone number _____, show that:

or

____ b. attached hereto as page 9 and made a part of this petition is the completed affidavit of
 _____, a physician or
 psychologist licensed to practice in Georgia or a licensed clinical social worker, who has
 examined the proposed ward within fifteen days prior to the filing of this petition, show that:

2.

The proposed ward, age _____, date of birth _____, social security no. _____, is domiciled at (address) _____
_____ County, State of _____, and is presently located at _____,
which is a (type of facility, if applicable) _____
and can be contacted at (telephone number): _____.

(initial if applicable)

_____ It is anticipated that the proposed ward will be moved within the next _____
days to the following address: _____,
_____, telephone number _____.

_____ The proposed ward is a citizen of a foreign country, being _____ (if
a guardianship or conservatorship is granted, pursuant to The Vienna
Convention, the Probate Court must notify the consul).

3.

The proposed ward is in need of a guardian and/or conservator by reason of the following incapacity:

_____ to the
extent that the proposed ward (initial one or both):

- _____ a. (for guardianship:) lacks sufficient capacity to make or communicate significant responsible decisions concerning his/her health or safety.
- _____ b. (for conservatorship:) lacks sufficient capacity to make or communicate significant responsible decisions concerning the management of his/her property.

The facts which support the claim of the need for a guardian and/or conservator are as follows:

(NOTE: the Petition cannot be granted unless sufficient facts are presented which support the claim for the need for the appointment of a guardian or conservator. While an attached physician's/psychologist's/social worker's affidavit is permissible, the Petitioner(s) MUST specifically allege sufficient facts to support the granting of this Petition.)

4.

It is in the best interest of the proposed ward that _____
_____ be appointed guardian and _____
_____ appointed conservator.

5.

The foreseeable duration of the incapacity will be: _____ and the Court
should allow the proposed ward to retain the following rights and powers: _____

_____.

6.

(NOTE: The law requires notice to be given to the spouse, if any, and to all living children, if any, whose addresses are known. If there are no living adult children whose addresses are known, then list at least two adults in the following order of priority: lineal descendants of the proposed ward; parents and siblings of the proposed ward; and friends of the proposed ward. In determining the persons to whom notice is required to be given according to the foregoing rules, the petitioner(s) should not be counted as persons receiving notice.)

Pursuant to law, the names, addresses, telephone numbers and relationships of the persons to be notified are as follows:

NAME	AGE (or over 18)	ADDRESS	TELEPHONE	RELATIONSHIP
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

7.

a. As to the guardianship, prior to the filing of this Petition, to the best of my/our knowledge, the following individual(s) has/have been nominated to serve under a living will, durable power of

attorney for healthcare, order relating to cardiopulmonary resuscitation, or other instrument that deals with the management of the person of the proposed ward in the event of incapacity. If any, please provide their name(s), address (es), indicate the nature of their interest, whether they are willing to act or have failed to act under said appointment: _____

- b. As to the guardianship, prior to the filing of this Petition, to the best of my/our knowledge, the following individual(s) has/have been nominated in writing to serve as guardian by the proposed ward, his/her spouse, adult child, or parent. If any, please provide their name(s), addresses(es), indicate the nature of their interest, whether they are willing to act under said appointment, and whether the individual(s) is/are an owner, operator, or employee of a caregiving institution in which the proposed ward currently is receiving care: _____
- _____

8.

- a. As to the conservatorship, prior to the filing of this Petition, to the best of my/our knowledge, the following individual(s) has/have been nominated to serve under a power of attorney, trust, or other instrument that deals with the management of the property of the proposed ward in the event of incapacity. If any, please provide their name(s), address(es), the nature of their interest, and indicate whether they are willing to act or have failed to act under said appointment: _____
- _____

- b. As to the conservatorship, prior to the filing of this Petition, to the best of my/our knowledge, the following individual(s) has/have been nominated in writing to serve as conservator by the proposed ward, his/her spouse, adult child, or parent. If any, please provide their name(s), address (es), the nature of their interest, and indicate whether they are willing to act under said appointment, and whether the individual(s) is/are an owner, operator, or employee of a caregiving institution in which the proposed ward currently is receiving care : _____
- _____

(initial if applicable)

_____ The above individual(s) may have the following ownership or financial conflict of interest in serving as conservator: NOTE: A CONFLICT OF INTEREST MAY EXIST IF THE PROPOSED CONSERVATOR IS A CO-OWNER OF A JOINT ACCOUNT OR REAL PROPERTY WITH THE PROPOSED WARD. (list) _____

9.

Regarding other petitions for guardianship and/or conservatorship, (initial if applicable)

_____ a. (Name) _____, residing
at _____, has been
appointed as an emergency or permanent guardian/conservator for the proposed
ward in the following county and state: _____.

_____ b. A ruling on a Petition for the appointment of an emergency or permanent
guardian/conservator is pending in the following county and state: _____
_____.

_____ c. A petition for emergency or permanent guardianship/conservatorship has been
denied or dismissed within the two years prior to this filing by a court in the
following county and state: _____

_____.

_____ d. A petition for emergency or permanent guardianship/conservatorship has been
denied or dismissed within the two years prior to this filing by a court in this
state; however, there has been a significant change in the condition or
circumstances of the proposed ward as shown by the affidavit or evaluation,
attached as Exhibit "A."

10.

All known income and assets of the proposed ward are shown on page 11 attached hereto.

11.

A guardian ad litem should be appointed, because the following additional powers pursuant to
O.C.G.A. §29-4-23 (b) and O.C.G.A. §29-5-23(c) are requested, with the reasons for seeking such
powers: _____

12.

Additional Data: Where full particulars are lacking, state here the reasons for any such omission.

13.

It is in the best interest of the proposed ward that the within nominated guardian and/or conservator be appointed.

WHEREFORE, petitioner(s) pray(s):

1. that service be perfected as required by law;
2. that the court appoint legal counsel and an evaluator for the proposed ward and order an evaluation as required by law;
3. that upon receipt of the evaluation report, the court order a hearing to determine the need for a guardian and/or conservator for the proposed ward; and
4. that a guardian and/or conservator be appointed for the proposed ward.

Signature of first petitioner

Signature of second petitioner, if any

Printed Name

Printed Name

Address

Address

Telephone Number

Telephone Number

Signature of Attorney: _____

Typed/printed name of Attorney: _____

Address: _____

Telephone: _____ State Bar # _____

VERIFICATION

GEORGIA, _____ COUNTY

Personally appeared before me the undersigned petitioner(s) who on oath state(s) that the facts set forth in the foregoing petition are true.

Sworn to and subscribed before
me this ____ day of _____, 20____.

First Petitioner

NOTARY/CLERK OF PROBATE COURT
My Commission Expires _____

Printed Name

Sworn to and subscribed before
me this ____ day of _____, 20____.

Second Petitioner, if any

NOTARY/CLERK OF PROBATE COURT
My Commission Expires _____

Printed Name

CONSENT TO SERVE AS GUARDIAN/CONSERVATOR

RE: Petition for the appointment of guardian and/or conservator for _____
_____.

I/We, _____ having been nominated as guardian
and I/we, _____, having been nominated as
conservator of the above-named proposed ward, do hereby consent to serve as such.

Proposed Guardian/Conservator

Proposed Guardian/Conservator

Print Name

Print Name

Address

Address

Telephone

Telephone

Proposed Guardian/Conservator

Print Name

Address

Telephone

STATE OF GEORGIA

COUNTY OF _____

PROBATE COURT OF _____ COUNTY

RE: Petition for appointment of a guardian and/or conservator for _____.

AFFIDAVIT OF PHYSICIAN, PSYCHOLOGIST, OR LICENSED CLINICAL SOCIAL WORKER

I, being first duly sworn, depose and say that I am a physician licensed to practice under Chapter 34 of Title 43 of the Official Code of Georgia Annotated, a psychologist licensed to practice under Chapter 39 of Title 43 of the Official Code of Georgia Annotated, or a Licensed Clinical Social Worker; that my office address is _____, Georgia,

and that I have examined the above-named proposed ward on the ____ day of _____,

20_____. **NOTE: The examination on which this affidavit is based must occur WITHIN FIFTEEN DAYS prior to the filing of the petition.** I found him/her to be incapacitated by reason of: _____

_____ to the extent that said proposed ward

(initial all applicable):

- _____ a. (for guardianship:) lacks sufficient capacity to make or communicate significant responsible decisions concerning his/her health or safety.
- _____ b. (for conservatorship:) lacks sufficient capacity to make or communicate significant responsible decisions concerning the management of his/her property.

The following facts support said diagnosis:

The foreseeable limits on the duration of such incapacity are:

WITNESS MY HAND AND SEAL this _____ day of _____, 20_____.

Sworn to and subscribed before me this
_____ day of _____, 20_____.

Signature of (Physician)(Psychologist)(Social Worker)

Notary Public

My commission expires on the ____ day Typed Name _____

of _____, 20_____.

(NOTARIAL SEAL AFFIXED)

NOTE: The examination on which this affidavit is based must occur WITHIN FIFTEEN DAYS prior to the filing of the petition.

**ASSETS, INCOME, OTHER SOURCES OF FUNDS, LIABILITIES, AND EXPENSES OF
PROPOSED WARD**

PROPOSED WARD: _____

REAL PROPERTY

(Indicate if property is jointly owned and with whom)

Description	County	State	Approximate equity and interest as to proposed ward.
Parcel 1 _____			\$ _____
Parcel 2 _____			\$ _____
Parcel 3 _____			\$ _____

INCOME FROM ALL SOURCES

	Yearly Total
Social Security per year	\$ _____
SSI (Supplemental Security Income) per year	\$ _____
Retirement benefits per year	\$ _____
VA benefits per year	\$ _____
Other income per year, including, e.g., alimony, annuity, or trust distributions	\$ _____
Interest, dividend, or investment income	\$ _____
YEARLY TOTAL OF ALL INCOME	\$ _____

DEBTS AND OTHER LIABILITIES

The proposed ward owes the following debts/liabilities:

1. Secured debts:

Obligor/Payee	Collateral	Solely/Jointly Owed	Approx. Current Balance as to proposed ward.
_____			\$ _____
_____			\$ _____
_____			\$ _____

2. Unsecured debts:

Obligor/Payee	Acct. No.	Solely/Jointly Owed	Approx. Current Balance
_____			\$ _____
_____			\$ _____
_____			\$ _____
TOTAL DEBTS AND OTHER LIABILITIES OF PROPOSED WARD			\$ _____

**AVERAGE MONTHLY LIABILITIES AND EXPENSES
AS TO PROPOSED WARD**

Household:

Care Facility/Rent/Mortgage payments:	\$ _____
Property taxes/Insurance	\$ _____
Utilities/Lawn Care/Pest Control	\$ _____
Miscellaneous household/food	\$ _____
Total credit account and other debt payments	\$ _____
Other (specify)	\$ _____

Automotive/Transportation

Fuel and Repairs	\$ _____
Tags and license fees, Insurance	\$ _____
Bus/Train/Taxi fares	\$ _____

Minors or Other Dependents of the Proposed Ward

Child Care	\$ _____
School Tuition/Supplies/Expenses/Lunches	\$ _____
Clothing/Diapers /Grooming/Hygiene	\$ _____

Medical/Dental/Prescription \$ _____

Entertainment/Activities \$ _____

Other Insurance

Health \$ _____

Life/Disability \$ _____

Other (specify) \$ _____

Proposed Ward's Other Expenses

Laundry/Clothing/Grooming/Hygiene \$ _____

Medical/Dental/Prescriptions/Medications \$ _____

Entertainment/Vacations/Subscriptions/Dues \$ _____

Personal Caretakers/Cleaning personnel \$ _____

Other (specify) \$ _____

Total Expenses \$ _____

Payments to Creditors:

Is the proposed ward behind in any debt payments? (yes) (no)

If so, payee and amount: _____

SUMMARY

1. Average Monthly Income \$ _____

2. Average Monthly Expenses <\$ _____>

ACKNOWLEDGMENT OF SERVICE

PROPOSED WARD _____ ESTATE NO. _____

Due and legal service of the Petition for Appointment of a Guardian and/or Conservator is hereby acknowledged by the following interested persons as shown in paragraph 6, in addition to any nominated guardian(s) and/or conservator(s). The undersigned acknowledges that he/she has received a copy of the Petition and all further service and notice is waived.

SIGNATURE(S)

Sworn to and subscribed before
me this ____ day of _____, 20____.

NOTARY/CLERK OF PROBATE COURT
My Commission Expires _____

Printed Name

Sworn to and subscribed before
me this ____ day of _____, 20____.

NOTARY/CLERK OF PROBATE COURT
My Commission Expires _____

Printed Name

Sworn to and subscribed before
me this ____ day of _____, 20____.

NOTARY/CLERK OF PROBATE COURT
My Commission Expires _____

Printed Name

Sworn to and subscribed before
me this ____ day of _____, 20____.

NOTARY/CLERK OF PROBATE COURT
My Commission Expires _____

Printed Name

Sworn to and subscribed before
me this ____ day of _____, 20____.

NOTARY/CLERK OF PROBATE COURT
My Commission Expires _____

Printed Name

GEORGIA PROBATE COURT
STANDARD FORM

Petition for the Appointment of a Guardian and/or Conservator for a Proposed Ward

NOTICE:

1. As to the Certificate to the Secretary of State, this page is to **only** be used when a determinative finding has been made that voting rights should be removed due to the lack of capacity of the ward. The Order must be amended to reflect this right was removed. The certificate must be mailed to the Secretary of State.
2. As to the Certificate to the GBI, this page should be used in all cases where a Guardianship/Conservatorship is established. Individuals so listed in this data base will be prohibited from obtaining a firearm permit. In the event the ward's rights are restored, such restoration of rights **must** be sent to the GBI, so the database can be updated. The Certificate only needs to be sent to the GBI and not the Guardianship Order.

NOTICE:

THE FOLLOWING FORMS ARE TO BE COMPLETED BY THE PETITIONER (MOVING PARTY) UNLESS OTHERWISE DIRECTED BY THE COURT. SEE PROBATE COURT RULE 5.6 (A).

PROBATE COURT OF _____ COUNTY

STATE OF GEORGIA

IN RE: _____, PROPOSED WARD)))))	ESTATE NO. _____ PETITION FOR APPOINTMENT OF A GUARDIAN AND/OR CONSERVATOR FOR A PROPOSED WARD
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ORDER FOR EVALUATION

The above and foregoing petition having been read and considered, and it appearing that there is sufficient evidence to believe that the proposed ward is in need of a guardian and/or conservator within the meaning of O.C.G.A. §29-4-1 and/or O.C.G.A. §29-5-1, it is hereby ordered that _____, (physician) (psychologist) (licensed clinical social worker), is appointed to evaluate the above-named proposed ward at ____ o'clock __.M., on _____ 20____ at (location) _____, telephone number _____. In compliance with Georgia law and federal law, including HIPAA, healthcare providers shall permit the above evaluator to have access to the proposed ward's medical records.

IT IS FURTHER ORDERED that the above-named proposed ward shall submit to an evaluation at the time and place stated above;

IT IS FURTHER ORDERED that the evaluator shall explain the purpose of the evaluation to the proposed ward;

IT IS FURTHER ORDERED that a Clerk/deputy clerk shall immediately notify the proposed ward of these proceedings by having all pleadings, as well as this order and the notice of proceedings to appoint guardian and/or conservator, personally served on the proposed ward;

IT IS FURTHER ORDERED that a Clerk/deputy clerk shall mail by first-class mail copies of the petition, this order and the notice of evaluation to all interested individuals identified in paragraphs 6, 7, and 8 of the Petition.

SO ORDERED this _____ day of _____, 20_____.

 Probate Judge

CERTIFICATE OF MAILING OF ORDER AND NOTICE OF PROCEEDINGS

ESTATE NO. _____

This is to certify that I have this day served the petitioner(s); the proposed ward's guardian ad litem (if any) and attorney; the spouse, family, and/or friends of the proposed ward as found in paragraphs 6, 7, and 8 of the Petition, who were ordered to be served by first-class mail, with a copy of the petition, order, and notice of proceedings to appoint guardian/conservator, by placing a copy of same in an envelope addressed to each and depositing same in the U.S. Mail, first-class, with adequate postage thereon.

This _____ day of _____, 20____.

PROBATE CLERK/DEPUTY CLERK

CERTIFICATE OF MAILING OF ORDER FOR DISMISSAL

ESTATE NO. _____

This is to certify that I have this day served the proposed ward with a copy of the (petition and)* order for dismissal by placing a copy of same in an envelope addressed to the proposed ward and depositing same in the U.S. Mail, first-class, with adequate postage thereon. I have also served a copy of the order for dismissal in the same manner upon the persons required in said order to be so served.

This _____ day of _____, 20____.

PROBATE CLERK /DEPUTY CLERK

* not necessary if dismissal is after evaluation.

CERTIFICATE OF MAILING OF ORDER AND NOTICE OF HEARING

ESTATE NO. _____

This is to certify that I have this day served the persons shown above in paragraphs 6, 7, and 8 of the Petition with a copy of the Order and Notice of Hearing and a copy of the evaluation report by placing copies of same in an envelope addressed to each and depositing same in the U.S. Mail, first-class, with adequate postage thereon.

This _____ day of _____, 20____.

PROBATE CLERK/DEPUTY CLERK

PROBATE COURT OF _____ COUNTY

STATE OF GEORGIA

IN RE: _____) ESTATE NO. _____
)
)
 _____,)
PROPOSED WARD) **PETITION FOR APPOINTMENT**
) **OF A GUARDIAN AND/OR**
) **CONSERVATOR FOR A PROPOSED**
) **WARD**

**NOTICE TO PROPOSED WARD OF PROCEEDINGS
TO APPOINT GUARDIAN AND/OR CONSERVATOR**

TO: _____: this is to notify you of a proceeding initiated
 in this court by _____
 _____ seeking to appoint (initial one or both)

- a. _____ a guardian for your person
- b. _____ a conservator for your property

and to inform you of your right to independent counsel. If you wish to retain your own attorney, you must notify this court within two days; otherwise, an attorney will be appointed for you by the court.

You are further notified that _____ has
 been appointed by the Court to evaluate you. You must submit to an evaluation by being present at:
 (location) _____ at
 _____ o'clock _____ M. on _____, 20____ which is not sooner than the fifth
 day after the service of notice on you.

Failure to present yourself for evaluation at the time and place above will authorize the court to order you transported directly to and from a medical facility or the office of the physician, psychologist, or licensed clinical social worker for the court-ordered evaluation.

YOU ARE FURTHER NOTIFIED:

YOU AND YOUR ATTORNEY HAVE THE RIGHT TO ATTEND ANY HEARING HELD ON THIS MATTER.

IF A GUARDIAN IS APPOINTED FOR YOU, YOU MAY LOSE IMPORTANT RIGHTS TO CONTROL AND MANAGE YOUR PERSON.

IF A CONSERVATOR IS APPOINTED FOR YOU, YOU MAY LOSE IMPORTANT RIGHTS TO CONTROL AND MANAGE YOUR PROPERTY.

ALTHOUGH YOU MUST ATTEND THE EVALUATION, YOU DO NOT HAVE TO RESPOND TO QUESTIONS.

Witness my hand and seal this _____ day of _____, 20____.

PROBATE CLERK/DEPUTY CLERK

PROBATE COURT OF _____ COUNTY

STATE OF GEORGIA

IN RE:	)	ESTATE NO. _____
)	
_____,	)	PETITION FOR APPOINTMENT OF
PROPOSED WARD	)	A GUARDIAN AND/OR
	)	CONSERVATOR FOR A
	)	PROPOSED WARD

APPOINTMENT OF ATTORNEY AND/OR GUARDIAN AD LITEM

(initial all applicable):

_____ It appearing that this Court has not been notified of the retention of counsel by the proposed ward within the prescribed two-day period, _____ telephone number _____, is hereby appointed as attorney for the proposed ward in this matter.

_____ IT IS FURTHER ORDERED that _____ is appointed as guardian ad litem for the proposed ward, and said individual shall

- _____ a. attend the guardianship hearing and make a recommendation to the Court.
- _____ b. file a written recommendation/report with the Court prior to the hearing and shall (be excused from appearing at) (attend) the hearing.

This _____ day of _____, 20_____.

Probate Judge

**CERTIFICATE OF MAILING OF ORDER APPOINTING ATTORNEY
AND/OR GUARDIAN AD LITEM**

ESTATE NO. _____

This is to certify that I have this day served the petitioner(s); the proposed ward's guardian ad litem (if any) and attorney; the spouse, family, and/or friends of the proposed ward as found in paragraphs 6, 7, and 8 of the Petition, who were ordered to be served by first-class mail, with a copy of the above order, by placing a copy of same in an envelope addressed to each and depositing same in the U.S. Mail, first-class, with adequate postage thereon.

This _____ day of _____, 20_____.

PROBATE CLERK/DEPUTY CLERK

EVALUATOR'S REPORT

GUARDIANSHIP/CONSERVATORSHIP PROCEEDINGS

ESTATE NO. _____

PETITIONER(S) _____

PROPOSED WARD _____

In compliance with the Order of the Probate Court of _____
County dated _____, 20_____, I performed an evaluation of the above-named
proposed ward on _____, 20 _____. This evaluation took place at (location) _____
_____ beginning at
_____ o'clock. The evaluation continued for _____ minutes. I explained the
purpose of the evaluation to the proposed ward.

The following questions, instruments, or tests were utilized in the evaluation:

Below is a list of all persons and other sources of information consulted in evaluating the proposed ward:

The following is a description of the proposed ward's mental and physical state and condition, including all observed facts considered by me:

The following is a description of the overall social condition of the proposed ward, including support, care, education, and well-being:

The following are my findings as to the needs of the proposed ward and their foreseeable duration:

(initial all applicable)

_____ a. I find the proposed ward lacks sufficient capacity by reason of: _____

_____ to the extent that said proposed ward:

_____(i) (for guardianship:) lacks sufficient capacity to make or communicate significant responsible decisions concerning his/her health and safety.

_____(ii) (for conservatorship:) lacks sufficient capacity to make or communicate significant responsible decisions concerning the management of his/her property.

_____ b. I do not find that the proposed ward meets the standards for guardianship set out in a. (i) above.

_____ c. I do not find that the proposed ward meets the standards for conservatorship set out in a. (ii). above.

Physician licensed under Chapter 34 of Title 43 of the
Official Code of Georgia Annotated
or
Psychologist licensed under Chapter 39 of Title 43 of the
Official Code of Georgia Annotated
or
Licensed Clinical Social Worker

Sworn to and subscribed before me
This _____ day of _____, 20_____.

Notary Public/Clerk, Probate Court
My Commission Expires _____

NOTE: This report must be filed with the Probate Court no later than (7) days after the date of examination.

PROBATE COURT OF _____ COUNTY

STATE OF GEORGIA

IN RE:	)	ESTATE NO. _____
)	
_____,	)	PETITION FOR APPOINTMENT OF
PROPOSED WARD	)	A GUARDIAN AND/OR
	)	CONSERVATOR FOR A
	)	PROPOSED WARD

ORDER FOR DISMISSAL

The above and foregoing petition having been read and considered pursuant to O.C.G.A. §29-4-11 and/or O.C.G.A. §29-5-11, and (initial one):

_____ a. Based on the allegations made in the petition and prior to the court-ordered evaluation, it appears that there is not probable cause to believe that the proposed ward is in need of a guardian or conservator within the meaning of O.C.G.A. §29-4-1 and/or O.C.G.A. §29-5-1, therefore, it is

ORDERED that the petition is dismissed.

IT IS FURTHER ORDERED that a copy of the petition, the affidavit, if any, and this order be served on the proposed ward by first-class mail, and a copy of this order be served in the same manner upon the petitioner(s) or his/her/their attorney, if any.

_____ b. Based on the allegations made in the petition and after review and consideration of the court-ordered evaluation report filed with this court, this court finds that there is not probable cause to support a finding that the proposed ward is in need of a guardian or a conservator within the meaning of O.C.G.A. §29-4-1 and/or O.C.G.A. §29-5-1; therefore, it is

ORDERED that the petition is dismissed.

IT IS FURTHER ORDERED that a copy of this order and the court-ordered evaluation report be served on the proposed ward, his attorney, his guardian ad litem, if any, and to the petitioner(s) or her/her/their attorney, if any, by first class mail.

SO ORDERED this _____ day of _____, 20____.

Probate Judge

PROBATE COURT OF _____ COUNTY

STATE OF GEORGIA

IN RE:	)	ESTATE NO. _____
)	
_____ ,	)	PETITION FOR APPOINTMENT OF
PROPOSED WARD	)	A GUARDIAN AND/OR
	)	CONSERVATOR FOR A
	)	PROPOSED WARD

ORDER AND NOTICE OF HEARING

After review and consideration of the petition and the court-ordered evaluation report filed with this court, the court finds that there is probable cause to support a finding that the proposed ward is in need of a guardian and/or conservator within the meaning of O.C.G.A. §29-4-1 and/or O.C.G.A. §29-5-1,

THEREFORE, it is ordered and adjudged that:

1. A hearing shall be set for _____ o'clock __.M. on _____, 20____, which is not less than 10 days from the date that this notice is mailed, to determine the need for the appointment of a (guardian) (and/or) (conservator) for the above-named proposed ward, to be held (in the Probate Court of _____ County, courtroom _____, (address) _____, Georgia) (at the following location: _____). The proposed ward shall be represented by _____, attorney, at such hearing.
2. A copy of this order and a copy of the evaluation report shall be sent to the proposed ward, his/her attorney and guardian ad litem, if any, to the interested persons shown in paragraphs 6, 7, and 8 of the petition, and to the petitioner(s) and his/her/their attorney, if any. These copies shall be sent by a Clerk/deputy clerk, first-class mail, as soon as practicable after the signing of this order.

SO ORDERED this _____ day of _____, 20_____.

Probate Judge

STIPULATION AND WAIVER BY PROPOSED WARD'S ATTORNEY

GEORGIA, _____ COUNTY ESTATE NO. _____

TO THE PROBATE COURT OF SAID STATE AND COUNTY

IN RE: PETITION FOR THE APPOINTMENT OF A GUARDIAN AND/OR CONSERVATOR
FOR _____, PROPOSED WARD

The undersigned, as the attorney representing the above-named proposed ward in these proceedings,
(initial all applicable:)

_____ a. does hereby stipulate into evidence the affidavit prepared by (name of affiant/
evaluator) _____, being the
evaluation report Ordered by the Court in this matter, and hereby waives the
appearance of such affiant at any hearing concerning the said petition.

_____ b. does hereby stipulate into evidence the affidavit prepared by (name of affiant/
evaluator) _____, which is the affidavit
referred to in Paragraph 1(b) of the petition), and hereby waives the appearance
of such affiant at any hearing concerning the said petition.

_____ c. does further waive the appearance of my client the proposed ward at said hearing.

This _____ day of _____, 20_____.

Attorney

Typed/printed name of Attorney: _____

Address: _____

Telephone: _____ State Bar # _____

PROBATE COURT OF _____ COUNTY

STATE OF GEORGIA

IN RE:	)	ESTATE NO. _____
)	
_____,	)	PETITION FOR APPOINTMENT
PROPOSED WARD	)	OF A GUARDIAN AND/OR
	)	CONSERVATOR FOR A PROPOSED
	)	WARD

FINAL ORDER

A hearing was held on the above-referenced petition on _____, 20____, and after considering the pleadings, the evaluation report and the evidence taken at the hearing, the Court makes the following:

FINDINGS OF FACT

1.

All procedural requirements of O.C.G.A. §29-4-11 and/or O.C.G.A. §29-5-11 have been met.

2.

The above-named proposed ward is in need of a guardian and/or conservator by reason of _____

_____.

Such need appears to be (permanent) (_____).

3.

The approximate current value of the personal property of the proposed ward is \$

The proposed ward has an interest in real property in the following locations:

- a. _____ County, (state) _____
- b. _____ County, (state) _____
- c. _____ County, (state) _____

The proposed ward has outstanding debts of \$_____ and average expenditures of \$_____ per month.

4.

Petitioner(s) moved the Court to appoint _____
guardian and _____ conservator for the proposed
ward asserting that/those individual(s) should serve because _____

(initial if applicable:)

_____ a. Another individual, being _____ was
nominated/designated by the proposed ward to serve as guardian,

_____ (i) and no good cause was shown to override such preference.

_____ (ii) but good cause was shown not to appoint said individual, being: _____

_____ b. Another individual with higher preference, being _____
_____ was nominated/designated to serve as guardian by

someone other than the proposed ward, and/but it (is) (is not) in the best interest
of the proposed ward to appoint him/her guardian because _____

_____ c. Another individual, being _____ was
nominated/designated by the proposed ward to serve as conservator,

_____ (i) and no good cause was shown to override such preference.

_____ (ii) but good cause was shown not to appoint said individual, being: _____

_____ d. Another individual with higher preference, being _____
_____ was nominated/designated to serve as conservator by

someone other than the proposed ward, and/but it (is) (is not) in the best interest
of the proposed ward to appoint him/her conservator because _____

5.

The Petitioner(s) requested that the guardian(s)/conservator(s) be granted the following additional
powers pursuant to O.C.G.A. §29-4-23 (b) and/or O.C.G.A. §29-5-23(b) and/or (c): _____

CONCLUSIONS OF LAW

The Court finds, by clear and convincing evidence that the above-named proposed ward (hereinafter referred to as "the ward") is in need of (initial all applicable):

- _____ a. a guardian because the ward lacks sufficient capacity to make or communicate significant responsible decisions concerning his/her health or safety. The duration of the guardianship is (permanent) (_____).
- _____ b. a conservator because the ward lacks sufficient capacity to make or communicate significant responsible decisions concerning the management of his/her property. The duration of the conservatorship is (permanent) (_____).

Therefore it is

ORDERED that _____ should be, and hereby is, appointed guardian(s) and _____ should be, and hereby is, appointed conservator(s) of the ward because _____.

Letters of guardianship and/or conservatorship shall issue to such guardian(s) and/or conservator(s) upon taking the required oath and upon the conservator(s) posting bond in the amount of \$_____.

The appointed guardian(s)/conservator(s) shall have no authority to act on behalf of the ward until Letters of Guardianship and/or Conservatorship have issued.

IT IS FURTHER ORDERED that due to the appointment of a guardian, this Order REMOVES from the ward the power to (initial all that are applicable):

- _____ a. Contract marriage;
- _____ b. Make, modify, or terminate other contracts;
- _____ c. Consent to medical treatment;
- _____ d. Establish a residence or dwelling place;
- _____ e. Change domicile;
- _____ f. Revoke a revocable trust established by the ward;
- _____ g. Bring or defend any action at law or equity, except an action relating to the guardianship.

IT IS FURTHER ORDERED that due to the appointment of a conservator, this Order
REMOVES from the ward the power to (initial all that are applicable):

- _____ a. Make, modify, or terminate contracts, other than the power to contract marriage;
- _____ b. To buy, sell, or otherwise dispose of or encumber property;
- _____ c. Enter into or conduct other business or commercial transactions;
- _____ d. Revoke a revocable trust established by the ward;
- _____ e. Bring or defend any action at law or equity, except an action relating to the conservatorship.

IT IS FURTHER ORDERED that the guardian(s) and/or conservator(s) shall have the following additional powers as set forth in O.C.G.A. §29-4-23(b) and O.C.G.A. §29-5-23(b)(1) and (c): _____

IT IS FURTHER ORDERED that, if only a guardian is appointed for the ward, or if different individuals are appointed guardian and conservator, the following reasonable sums of property shall be provided to the guardian to provide adequately for the ward's support, care, education, health, and welfare, until further Order of the Court: \$_____ per _____.

IT IS FURTHER ORDERED that the guardian shall file, in addition to the personal status report, the following supplemental report: _____
(monthly) (annually).

IT IS FURTHER ORDERED that a copy of this Order shall be served by first class mail on the ward, the ward's attorney; the guardian ad litem, if any; the guardian(s) and/or conservator(s); the petitioner(s); his/her/their attorney(s); and the individuals listed in paragraphs 6, 7, and 8 of the Petition.

IT IS FURTHER ORDERED that the ward's legal counsel shall make reasonable efforts to explain to the ward this Order and the ward's rights under this Order.

IT IS FURTHER ORDERED that, within 30 days of the date hereof, the clerk/deputy clerk shall file the certificate of creation of conservatorship in accordance with O.C.G.A. §29-5-13(d) with the Clerk of Superior Court of each county in this state in which the ward owns real property.

SO ORDERED this _____ day of _____, 20_____.

Probate Judge/Hearing Officer exercising the
jurisdiction of the Probate Court pursuant
to O.C.G.A. §29-4-12(d)(7) and/or §29-5-12(d)(7)

CERTIFICATE OF MAILING OF FINAL ORDER

ESTATE NO. _____

I have this date mailed (or handed) a copy of the above Order to the ward, his/her attorney, (his/her guardian ad litem), (his/her representatives,) the guardian(s), the conservator(s), the interested persons shown in paragraphs 6, 7, and 8 of the petition, the petitioner(s), and (petitioner's attorney).

Date

PROBATE CLERK/DEPUTY CLERK

CERTIFICATE OF FILING CERTIFICATE OF CREATION OF CONSERVATORSHIP

ESTATE NO. _____

I have this date hand-delivered and/or mailed for filing a Certificate of Creation of Conservatorship to the Clerk of the Superior Court of each of the following counties, together with payment of any recording costs: _____

PROBATE CLERK/DEPUTY CLERK

ADDRESS

TELEPHONE

(Above space to be used for filing in Superior Court Clerk's Office Deeds and Records)

Probate Court Return Mailing Address:

CERTIFICATE OF CREATION OF CONSERVATORSHIP

(Pursuant to O.C.G.A. §29-5-13(d))

GEORGIA, _____ County

PROBATE ESTATE NO. _____

DATE ORDER ISSUED: _____

GRANTOR: (NAME OF WARD) _____

GRANTEE: (NAME OF CONSERVATOR(S) OF ABOVE WARD)

A Conservatorship has been created for the above-named ward.

_____ a. The Conservatorship is permanent.

_____ b. The expiration date set by court order is _____, 20____.

Original Certificate delivered or mailed to Clerk of Superior Court of _____
_____ County on _____, 20____.

I do hereby certify that the above information is based on the order of the Probate Court issued on the date set out above and that the above information is true and correct.

By: _____
PROBATE CLERK/DEPUTY CLERK

STATE OF GEORGIA

COUNTY OF _____

ESTATE NO. _____

LETTERS OF GUARDIANSHIP OF ADULT WARD

From the Judge of the Probate Court of said County.

Date of Birth: _____

TO: _____, Guardian(s)

RE: _____, Adult Ward

The above-named adult ward has been found by this Court to be in need of a guardian, and this Court has entered an order designating you as such guardian(s). You have assented to this appointment by taking your oath. In general, your duties as guardian are to protect and maintain the person of the ward.

Special Instructions:

1. It is your duty to see that the ward is adequately fed, clothed, sheltered and cared for, and that the ward receives all necessary medical attention.
2. You must keep the Court informed of any change in your name or address and promptly notify the Court of any conflict of interest arising between you and your ward.
3. Within 60 days after appointment and within 60 days after each anniversary date of appointment, you must file with the probate court a personal status report concerning your ward which shall include:
 - (a) A description of the ward's general condition, changes since the last report, and needs;
 - (b) Your recommendations for any alteration in the guardianship order;
 - (c) All addresses of the ward during the reporting period and the living arrangements of the ward for all addresses;
 - (d) A description of the amount of any funds received and expended by the guardian for the support of the ward.
4. Please consult your attorney if you have any questions.
5. Your authority to act pursuant to these Letters is subject to applicable statutes and to any special orders entered in this case.

Given under my hand and official seal, the _____ day of _____, 20____.

Probate Judge

NOTE: The following must be signed if the judge does not sign the original of this document:

Issued by:

PROBATE CLERK/DEPUTY CLERK (Seal)

STATE OF GEORGIA
COUNTY OF _____

ESTATE NO. _____

LETTERS OF CONSERVATORSHIP OF ADULT WARD

From the Judge of the Probate Court of said County.

Date of Birth: _____

TO: _____, Conservator(s)

RE: _____, Adult Ward

The above-named adult ward has been found by this Court to be in need of a conservator, and this Court has entered an order designating you as such conservator(s). You have assented to this appointment by taking your oath and posting a bond. In general, your duties as conservator are to protect and maintain the property of the ward.

Special Instructions:

1. You must keep your ward's funds separate from your own. You should put your ward's funds in a separate checking or savings account, as appropriate, and make all payments by check.
2. You may not sell, mortgage, give away, or otherwise dispose of any of your ward's property without a court order.
3. You may not spend any of your ward's funds for any purpose except as set forth in the court approved budget without a court order.
4. You must file within two months of your appointment an inventory showing the ward's property and a plan for managing, expending, and distributing the property. Further, you must file, within 60 days of each anniversary date of these Letters an annual return, showing all receipts and disbursements, accompanied by an affidavit certifying that the original vouchers (checks) have been compared with the items listed on the return, and that the return is correct, together with an updated inventory and plan for managing the property. A copy of said return shall be sent by first class mail to the surety, the ward, and the guardian, if any.
5. The regular commissions allowed a conservator are 2.5% on all sums of money received, and 2.5% on all sums paid out, as shown by the annual or final return. There are special rules concerning commissions for property delivered in kind, interest earned, extraordinary services, and market value of property held as of the last day of your reporting period.
6. You must keep the Court informed of any change in your name or address and promptly notify the Court of any conflict of interest arising between you and your ward.
7. You should inform the Court of any change of location of your ward.
8. Please consult your attorney if you have any questions.
9. Your authority to act pursuant to these Letters is subject to applicable statutes and to any special orders entered in this case.

Given under my hand and official seal, the _____ day of _____, 20_____.

Probate Judge

NOTE: The following must be signed if the judge does not sign the original of this document

Issued by:

PROBATE CLERK/DEPUTY CLERK

(Seal)

STATE OF GEORGIA
COUNTY OF _____

ESTATE NO. _____

LETTERS OF GUARDIANSHIP AND CONSERVATORSHIP OF ADULT WARD

From the Judge of the Probate Court of said County. Date of Birth: _____
TO: _____, Guardian(s) and Conservator(s)
RE: _____, Adult Ward

The above-named adult ward has been found by this Court to be in need of a guardian and conservator, and this Court has entered an order designating you as such guardian(s) and conservator(s). You have assented to this appointment by taking your oath and posting a bond. In general, your powers and duties are to protect and maintain the person and property of the ward.

Special Instructions:

1. It is your duty to see that your ward is adequately fed, clothed, sheltered and cared for, and that your ward receives all necessary medical attention.
2. You must keep your ward's funds separate from your own. You should put your ward's funds in a separate checking or savings account, as appropriate, and make all payments by check.
3. You may not sell, mortgage, give away, or otherwise dispose of any of your ward's property without a court order.
4. You may not spend any of your ward's funds for any purpose, except as set forth in the court approved budget, without a court order.
5. You must file within two months of your appointment an inventory showing the ward's property and a plan for managing, expending, and distributing the property. Further, you must file, within 60 days of each anniversary date of these Letters an annual return, showing all receipts and disbursements, accompanied by an affidavit certifying that the original vouchers (checks) have been compared with the items listed on the return, and that the return is correct, together with an updated inventory and plan for managing the property. A copy of said return shall be sent by first class mail to the surety, the ward, and the guardian, if any.
6. The regular commissions allowed a conservator are 2.5% on all sums of money received, and 2.5% on all sums paid out, as shown by the annual or final return. There are special rules concerning commissions for property delivered in kind, interest earned, extraordinary services, and market value of property held as of the last day of your reporting period.
7. You must keep the Court informed of any change in your name or address and promptly notify the Court of any conflict of interest arising between you and your ward.
8. Within 60 days after appointment and within 60 days after each anniversary date of appointment, you must file with the probate court a personal status report concerning your ward which shall include:
 - (a) A description of your ward's general condition, changes since the last report, and needs;
 - (b) Your recommendations for any alteration in the guardianship/conservatorship order;
 - (c) All addresses of the ward during the reporting period and the living arrangements of the ward for all addresses.
9. Your authority to act pursuant to these Letters is subject to applicable statutes and to any special orders entered in this case.

Given under my hand and official seal, the _____ day of _____, 20_____.

NOTE: The following must be signed if the judge does not sign the original of this document _____
Issued by: _____ Probate Judge

(Seal)
PROBATE CLERK/DEPUTY CLERK

CERTIFICATE OF VOTING RIGHTS REMOVED

DATE _____, 20_____

TO: Secretary of State
Election Division
802 West Tower
2 Martin Luther King, Jr. Dr., SE
Atlanta, Ga. 30334

From: _____

Judge of Probate Court of _____

ESTATE NO. _____

The following individual has been adjudicated to lack sufficient mental capacity and his/her voting rights have been removed:

NAME _____

ADDRESS _____

DATE OF BIRTH _____

DATE OF ORDER REMOVING RIGHT TO VOTE _____

CERTIFICATE OF FILING OF VOTING RIGHTS REMOVED

ESTATE NO. _____

I have this date mailed for filing a Certificate of Voting Rights Removed and enclosed a copy of the Order removing such voting rights to the Office of the Secretary of State by placing a copy of same in an envelope addressed as set forth above and depositing same in the U.S. Mail, first-class, with adequate postage thereon.

PROBATE CLERK/DEPUTY CLERK

ADDRESS

TELEPHONE

CERTIFICATE OF GUADIANSHIP/CONSERVATORSHIP ESTABLISHED

DATE _____, 20____

TO: G.B.I/7CJIS Operations Unit
P.O. Box 370748
Decatur, Ga. 30037-0748

FROM _____
(Judge's Name)

JUDGE OF PROBATE COURT OF _____ COUNTY, GEORGIA

ESTATE NO. _____

PROBATE COURT ORI NUMBER _____

THE FOLLOWING INDIVIDUAL HAS BEEN ADJUDICATED TO LACK SUFFICIENT MENTAL CAPACITY AND GUARDIANSHIP/CONSERVATORSHIP HAS BEEN ESTABLISHED.

NAME _____

ADDRESS _____

DATE OF BIRTH _____

DATE OF ORDER DECLARING PERSON TO LACK SUFFICIENT MENTAL CAPACITY _____

RACE _____ SEX _____
(Please list Asian, Black, Indian, White or Other)

CERTIFICATE OF FILING

ESTATE NO. _____

I hereby certify that the above stated information is true and correct and that I have this date mailed this Certificate of Guardianship/Conservatorship Established to the Georgia Bureau of Investigation by placing copies of same in an envelope addressed as set forth above and depositing same in the U.S. Mail, first-class, with adequate postage thereon.

PROBATE CLERK/DEPUTY CLERK

ADDRESS

TELEPHONE