

STATE OF MINNESOTA
COUNTY OF _____

DISTRICT COURT
_____ Judicial District
PROBATE DIVISION

Court File No. _____

In Re: Guardianship Conservatorship of

Acceptance of Appointment

Professional Individual Individual
 Corporation

By Individual:

As a condition to receiving letters, I, _____, the appointed
 Guardian Conservator of _____, verify that I understand the duties
and responsibilities required of me in this role. I hereby accept my appointment and will fully and faithfully
perform all of my duties according to law and submit to the jurisdiction of the Court in any proceeding
relating to this person subject to guardianship and/or person subject to conservatorship that may be brought
by the court or any person interested in the affairs of the person subject to guardianship and/or person
subject to conservatorship.

I have watched the Guardianship/Conservatorship Educational Video. _____ (initial here)

I am a professional conservator as defined by Minn. Stat. § 524.5-102, subd. 13c.

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn.
Stat. § 358.116.

Dated

Signature

County and state where signed

Name: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Email: _____

By Corporation:

[Click here to enter text.](#) (“Corporation”) is a corporation under the Laws of the State of Minnesota. As
a condition to receiving letters as Guardian Conservator, the Corporation (1) accepts the duties of
such appointment, (2) agrees to be bound by Minnesota law relating to guardians and conservators, (3)
submits to the jurisdiction of the Court in any proceeding relating to this person subject to guardianship
and/or person subject to conservatorship that may be brought by the court or any person interested in the
affairs of the person subject to guardianship and/or person subject to conservatorship, and (4) employees

of the corporation directly responsible for carrying out the duties and responsibilities of a guardian and/or conservator have watched the Guardianship/Conservatorship Educational Video and understand the duties and responsibilities of the role of guardian and/or conservator.

The corporation has authorized this acceptance to be signed in the corporate name.

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

Dated

Signature

County and state where signed

Name: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Email: _____