

INSTRUCTIONS

Co-Guardians/Co-Conservators (Uncontested)

Forms you will need for your Petition to Appoint Co-Guardians and/or Co-Conservators:

- Petition for Appointment of Co-Guardians and/or Co-Conservators;
- Acceptance of Appointment;
- Order Appointing Co-Guardians and/or Co-Conservators;
- Letters of Co-Guardians and/or Co-Conservators;
- Notice of Hearing and Notice of Rights;
- Affidavit of Service (Form GAC 2-U);
- Notice Regarding Background Check Requirements (Form GAC 104);
- Affidavit Regarding Background Study (Form GAC 102)(you may need depending on the situation);
- DHS Background Check Form (Form GAC 103)(you may need depending on the situation).



Do not use these forms for a successor guardianship and/or conservatorship or if there are any disputes related to your Petition for Co-Guardians and/or Co-Conservators. **Co-Guardians/ Co-Conservators must agree on every action.** A few examples of disputes may be whether or not Co-Guardians/ Co-Conservators should be appointed, who should be appointed the Co-Guardians/Co-conservators, or what rights the Co-Guardians/Co-conservators should have. If the parties involved are not in agreement, your Petition for Co-Guardians and/or Co-Conservators is considered contested and you cannot use these forms. You should seek legal advice on how to move forward.

Overview of Steps

1. Complete the court forms, following all of the steps in these instructions.
2. File the original forms with Court Administration (filing fee or fee waiver is required).
3. Arrange for service.
4. Appear at the hearing.

Important Notices and Resources

The Court has forms and instructions, for some types of cases, as a general guide to the court process. These instructions explain the steps in more detail and answer common questions, but are not a full guide to the law. Court employees may be able to give general information on court rules and procedures, but they cannot give legal advice.

Got a question about court forms or instructions?

- Visit www.MNCourts.gov/SelfHelp.
- Call the Tenth Judicial District Self Help Center at (763) 760-6699.

Not sure what to do about a legal issue or need advice?

- Talk with a lawyer.
- Visit <https://mncourts.gov/Help-Topics/Find-a-Lawyer.aspx>

Helpful materials may be found at your public county law library. For a directory, see <http://mn.gov/law-library/research-links/county-law-libraries.jsp>. For more information, contact your court administrator or call the Minnesota State Law Library at 651-297-7651.

General Information About Guardianship/Conservatorship

The information contained in this document is not intended as legal advice but as a general guide to explain the legal process. **If you do not understand any of these procedures, talk to an attorney. Court staff cannot give legal advice.**

CAUTION: BEFORE YOU PROCEED, THE CO-GUARDIANS AND/OR CO-CONSERVATORS HAVE THE RESPONSIBILITY TO:

*Read the Guardianship and Conservatorship Manual. The Manual can be found at the following link <http://mncourts.gov/GetForms.aspx?c=21&f=442>. This resource provides an overview of what a guardianship and conservatorship is, the process for starting a guardianship and/or conservatorship and the ongoing requirements and obligations of those appointed as guardians and conservators.

*Watch the Conservatorship/Guardianship Education Video. This video is on the Minnesota Judicial Branch website on the Guardianship and Conservatorship Help Topic webpages: <http://mncourts.gov/Help-Topics/Guardianship.aspx>
<http://mncourts.gov/Help-Topics/Conservatorship.aspx>

*Determine whether a Background Study needs to be completed. Read the Notice to Proposed Guardians/Conservators Regarding Background Check Requirements (Form GAC 104) to determine if you need to complete a background study. If you completed a background study within the last five (5) years, fill out the Affidavit Regarding Background Study (Form GAC 102). If you need to complete a background study, follow the instructions on the Information Sheet and fill out the DHS Background Check Form (Form GAC 103).

NOTE: These forms may be used to start a guardianship/conservatorship, establish Co-Guardians or Co-Conservators, or add an additional person as Co-Guardian or Co-Conservator later in the guardianship/conservatorship process. You **CANNOT** use these forms to ask the Court for successor Co-Guardians and/or Co-Conservators.

Legal Terms:

Co-Guardians: Two or more persons appointed by the court to make personal decisions for the person subject to guardianship, such as where to live, medical decisions, training and education, etc.

Person Subject to Guardianship: a minor or incapacitated adult who has a court appointed guardian, lacks sufficient understanding or capacity to make or communicate responsible personal decisions, and who has an inability to meet personal needs for medical care, nutrition, clothing, shelter, or safety.

Co-Conservators: Two or more persons appointed by the court to make financial decisions for the protected person. A conservator typically has the power to enter into contracts,

pay bills, invest assets, and perform other financial functions for the person subject to conservatorship.

Kin: Parents, adult siblings, adult children including adult step-children of living spouse, or as otherwise determined by the court. *See* Minn. Stat. § 524.5-102.

Person Subject to Conservatorship: a person who has a court appointed conservator because they lack the capacity or ability to make decisions regarding their financial affairs or estate.

Step 1
Fill out the Petition for Appointment of Co-Guardians and/or Co-Conservator

How to Fill out the Petition:

- Fill out the case caption.
 - Write the County where the current case is in and the Court File Number. The Court File Number can be found by looking at <http://mncourts.gov/Access-Case-Records.aspx> and by selecting the civil case search category and entering a party name for the case.
 - Check the box for whether the matter is a Guardianship, Conservatorship or both and whether you are asking to have a Co-Guardian, Co-Conservator, or both be appointed.
 - Write in the name of the person subject to guardianship and/or person subject to conservatorship.
- Fill out the areas of the Petition as completely as possible. If you are using this petition to add a Co-Guardian or Co-Conservator because there is already an existing guardianship/conservatorship, then some of the information to be filled out may be the same as what was listed in the initial Petition for Guardianship/Conservatorship.

The following instructions will help in completing the Petition for Appointment of Co-Guardians and/or Co-Conservators. For example, read paragraph #1 below for help in answering Paragraph #1 on the Petition for Appointment of Co-Guardians and/or Co-Conservators.

Paragraphs #1-6

1. The person who is asking the court to appoint Co-Guardians and/or Co-Conservators is the **Petitioner**. Write the Petitioner's full name; address or P.O. Box; telephone number; interest in the matter; and relationship to the person subject to guardianship and/or person subject to conservatorship in the matter.

2. The person who is subject to guardianship and/or person subject to conservatorship is the **Respondent**. Write the Respondent's name, address, telephone number, age and date of birth.
3. If a guardianship/conservatorship has already been established, check the box and write the date when the court first created the guardianship and/or conservatorship. If this is the first time you are petitioning the court for a guardianship and/or conservatorship, then write "Not Applicable" here.
4. You must tell the Court the length of time you would like the Co-Guardianship and/or Co-Conservatorship to last. It can be for an unlimited duration (no timing restrictions) or a limited duration (specific length of time.) **Minnesota law says that if the Respondent is under 30 years old, a guardianship cannot exceed 72 months.** This 72 month restriction does not apply to conservatorships. If you ask for a limited duration, please write the length of time you would like the Court to establish the Co-Guardianship/Co-Conservatorship for.
5. Write whether you plan to move the Respondent or not. If you plan to move the Respondent, write the address where the Respondent will be moved and the name of the facility, if the Respondent is being moved to a facility.
6. The next section asks for you to list the Respondent's spouse, kin, and other interested persons. If the information requested does not apply to the Respondent, write "not applicable."
 - a. Write the name, address and relationship of the Respondent's spouse.
 - b. Write the name, address and relationship of any adults the Respondent has lived with for more than six (6) months.
 - c. Write the name, address and relationship of any adult children including adult step-children of living spouse, parents, adult siblings, or other nearest adult kin of the Respondent.
 - d. Write the name, address and relationship of the administrator for the hospital, nursing home, VA unit, group home, or other institution the Respondent is living in.
 - e. Write the name, address and relationship of the Respondent's legal representative (one who represents or stands in the place of another under authority recognized by law).
 - f. Write the name, address and relationship of any person nominated, proposed or confirmed by previous court order as the Respondent's guardian or conservator.

****NOTE: If you are only asking the Court to appoint Co-Guardians, fill out Paragraphs #7 – 17 and check the box after Paragraph #16 to indicate you are not asking the Court to appoint Co-Conservators.***

If you are only asking the Court to appoint Co-Conservators, fill out Paragraphs #18 – 29 and check the box after Paragraph #6 to indicate you are not asking the Court to appoint Co-Guardian.

If you are asking the Court to appoint both Co- Guardians and Co- Conservators, fill out Paragraphs #7 – 29.

Paragraphs #7 - 17

7. Explain the reasons why Co-Guardians are needed.
 - A. Describe the Respondent’s mental condition and explain how the Respondent is unable to make personal decisions and meet their needs.
 - B. Describe the Respondent’s behaviors and explain how the Respondent is unable to care for themselves, etc. Examples may include: the Respondent has a traumatic brain injury and cannot physically do basic care for themselves or the Respondent was injured in a car accident and needs assistance with making good choices for maintaining their health and basic needs, etc.
 - C. Write the less restrictive means that have been tried and why they do not work. Less restrictive options may be: technological assistance, supported decision making, community or residential services, power of attorney, health care agent, or representative payee.
8. Check the box which best explains the powers the Co-Guardians are requesting. If you already have a guardianship, then you may want to review the initial Petition for Guardianship/Conservatorship filed and see if the selections chosen at that time are still necessary now.

The first box should be checked if the Co-Guardians need all the rights and powers on behalf of the Respondent. If all the rights and powers on behalf of the Respondent are requested, you need to provide information as to why granting limited powers is not sufficient for the person subject to guardianship.

The other boxes can be checked if the Co-Guardians only require limited powers and duties to act on behalf of the Respondent. Check only those powers and duties that are needed.

9. Fill out the name, age, address or P.O. Box, and telephone number for the proposed Co-Guardian #1 and Co-Guardian #2. Check whether they were appointed or nominated. Tell

the court why the proposed Co-Guardians are the most suitable and best qualified among those available and willing to serve. The proposed Co-Guardians also cannot be excluded from appointment.

10. Write the name of the proposed Co-Guardian #1 and Co-Guardian #2 and the rate the proposed Co-Guardians intend to charge for his/her services. Any proposed Co-Guardian cannot be appointed if they have previously been removed. Check the box whether the proposed Co-Guardians have been previously removed for cause or not, and write the court location and court file number.
11. If the proposed Co-Guardians are not professional guardians, skip this question.

If either proposed Co-Guardian is a professional guardian, write the professional guardian's name, employer's name and address, educational background/work experience, and the hourly rate that they charge for their services.
12. Write the name of the proposed Co-Guardian #1 and Co-Guardian #2. Check whether the proposed Co-Guardians have applied for or held any professional licenses and, if so, list them. If those licenses have been revoked, denied, conditioned, suspended or cancelled, explain why.
13. Write the name of the proposed Co-Guardian #1 and Co-Guardian #2. Check whether the proposed Co-Guardians have been found civilly liable for any of the listed actions and, if so, include the court location and case number.
14. Write the name of the proposed Co-Guardian #1 and Co-Guardian #2. Check whether the proposed Co-Guardians have filed for protection under bankruptcy laws in the last five (5) years.
15. Write the name of the proposed Co-Guardian #1 and Co-Guardian's #2. Check whether the proposed Co-Guardians have any outstanding civil monetary judgments and, if so, list the court location, case number and outstanding amount owed.
16. Write the name of the proposed Co-Guardian #1 and Co-Guardian #2. Check whether the proposed Co-Guardians have an order for protection or harassment restraining order against them and, if so, list the court location and case number.
17. Write the name of the proposed Co-Guardian #1 and Co-Guardian #2. Check whether the proposed Co-Guardians have been convicted of a gross misdemeanor or felony crime and, if so, list the case number and convicted offense.

Paragraphs #18 – 29

If you are only asking the Court to appoint Co-Guardians, check the box after Paragraph #17 to indicate you are not asking the Court to appoint Co-Conservators. You only need to fill out these paragraphs if you want Co-Conservators to be appointed.

18. Explain the reasons why Co-Conservators are needed.
- A. Describe the Respondent's mental condition and explain how the Respondent is unable to manage their property and finances.
 - B. Describe the Respondent's behaviors and explain how the Respondent has difficulty managing their property and finances. Examples may include: the Respondent does not understand what property they have or how to manage their budget and pay bills because of a brain injury or the Respondent has been making financial choices that are not in the Respondent's best interest because the Respondent has been improperly influenced by someone else and does not realize that this is happening because of an injury.
 - C. Write the less restrictive means that have been tried and did not work. Less restrictive options may be: technological assistance, supported decision making, community or residential services, power of attorneys, health care agent, or representative payee.

19. Check the box which best explains the powers the Co-Conservators are requesting. If you already have a conservatorship, then you may want to review the initial Petition for Guardianship/Conservatorship filed and see if the selections chosen at that time are still necessary now.

The first box should be checked if the Co-Conservators need all the rights and powers on behalf of the Respondent. If all the rights and powers on behalf of the Respondent are requested, you need to provide information as to why granting limited powers is not sufficient for the person subject to conservatorship.

The other boxes can be checked if the Co-Conservators only require limited powers and duties to act on behalf of the Respondent. Check only those powers and duties that are needed.

20. If the Respondent is employed or becomes employed at any time during the conservatorship, you must tell the Court how the Respondent's wages or salary from employment will be handled.

Check the first box if the Respondent's wages or salary will be paid to and controlled by the Respondent. The Co-Conservator would not include those wages or salary in the annual reporting.

Check the second box if the Respondent's wages or salary will be paid to and controlled by the Co-Conservators. The Co-Conservators must then include the Respondent's wages and salary in the annual reporting.

21. Fill out the name, age, address or P.O. Box, and telephone number for the proposed Co-Conservator #1 and Co-Conservator #2 and check whether they were appointed or

nominated. Tell the court why the proposed Co-Conservators are the most suitable and best qualified among those available and willing to serve. The proposed Co-Conservators also cannot be excluded from appointment.

22. Write the name of the proposed Co-Conservator #1 and Co-Conservator #2 and the rates they intend to charge for their services. Check the first box if they have never been removed for cause from serving as a guardian or conservator. Any proposed Co-Conservator cannot be appointed if they have previously been removed. Check the second box if they have been previously removed for cause, and write the court location and court file number.
23. If the proposed Co-Conservators are not professional conservators, skip this question.

If either proposed Co-Conservator is a professional conservator, write the professional conservator's name, employer's name and address, educational background/work experience, and the hourly rate that they charge for their services.
24. Write the name of the proposed Co-Conservator #1 and Co-Conservator #2. Check whether the proposed Co-Conservators have applied for or held any professional licenses and, if so, list them. If those licenses have been revoked, denied, conditioned, suspended or cancelled, explain why.
25. Write the name of the proposed Co-Conservator #1 and Co-Conservator #2. Check whether the proposed Co-Conservators have been found civilly liable for any of the listed actions and, if so, include court location and case number.
26. Write the name of the proposed Co-Conservator #1 and Co-Conservator #2. Check whether the proposed Co-Conservators have filed for protection under bankruptcy laws within the last five (5) years.
27. Write the name of the proposed Co-Conservator #1 and Co-Conservator #2. Check whether the proposed Co-Conservators have any outstanding civil monetary judgments and, if so, list the court location, case number and outstanding amount owed.
28. Write the name of the proposed Co-Conservator #1 and Co-Conservator #2. Check whether the proposed Co-Conservators have an order for protection or harassment restraining order against them and, if so, list the court location and case number.
29. Write the name of the proposed Co-Conservator #1 and Co-Conservator #2. Check whether the proposed Co-Conservators have been convicted of a crime (other than a petty misdemeanor or traffic offense) and, if so, list the case number and convicted offense.

Paragraphs #30-33

30. Fill out the current values of the Respondent's assets (house, money, investments, personal property) to the best of your knowledge. If the Respondent does not have the type of asset, write "0". Do not leave it blank. Write the total for all of the assets.
31. List the total known debts the Respondent currently has. If Respondent does not have any debts, write "0". Do not leave it blank.
32. Check the boxes for whether the Respondent is a patient of a State Hospital for persons with mental illness, whether the Respondent is a person with developmental disabilities or dependent and neglected ward of the Commissioner of Human Services and whether the Respondent is under the temporary custody of the Commissioner of Human Services.
33. Check the box whether the Respondent should maintain the right to vote and understands what voting means.

Under the "Wherefore" paragraph, write in the names of the proposed Co-Guardians and/or Co-Conservators you are appointing and check the corresponding box.

Sign and date. Write the county and state where you signed, your name, address and e-mail address.

<p>Step 2 Fill out the Acceptance of Appointment</p>
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Each Co-Guardian and/or Co-Conservator must fill out and sign an Acceptance of Appointment form. Fill out the case caption as you did in Step 1. Check whether you are a professional individual, individual, or corporation.

If you are a corporation, skip the first section for individuals and fill out the second section for corporations. If you are an individual, fill out the first section for individuals.

For individuals, write the name of the person(s) asking to be appointed as Co-Guardians and/or Co-Conservators on the line after "I". Check the box for Co-Guardian and/or Co-Conservator based on what you are asking the court to appoint.

Check the box stating you have watched the Guardianship/Conservatorship Education Video and Initial on the space provided. If you are a professional guardian and/or conservator, check that box.

Sign and date. Write the county and state where you signed, your name, date of birth, address, telephone number and e-mail address. Leave the section for corporations blank.

For corporations, write the name of the corporation asking to be appointed as Co-Guardian and/or Co-Conservator on the line after “P”. Select the box for Co-guardian and/or Co-Conservator based on what you are asking the court to appoint.

Sign and date. Write the county and state where you signed, your name, title, address, telephone number and e-mail address.

Step 3
Fill out the Order Appointing
Co-Guardian and/or Co-Conservator

Fill out the case caption as you did in Step 1. Leave the first paragraph blank.

Check with Court Administration in the county you are filing in to see if they require the Findings of Fact and the Order to be filled out before you file the Order.

Step 4
Fill out the Letters of
Co-Guardian and/or Co-Conservator

Fill out the case caption as you did in Step 1.

If you are asking for Co-Guardians to be appointed, write in the names of proposed Co-Guardians under “Co-Guardian” in bold. If you are asking for a Co-Conservators to be appointed, write in the name of proposed Co-Conservators under “Co-Conservator” in bold.

Leave the rest of the form blank.

Step 5
Fill out the Notice of Hearing and Notice of Rights

Fill out the case caption as you did in Step 1.

Check the first box if you are asking the court to appoint Co-Guardians. Write the names of the persons you are requesting to be appointed Co-Guardians. Check the second box if you are asking the court to appoint Co-Conservators. Write the names of the persons you are requesting to be appointed Co-Conservators. On the third line, write the Respondent’s name.

Under “Respondent’ Rights and Obligations” paragraph, write in Court Administration’s phone number.

When you file the documents with Court Administration, court staff will fill out the bottom half of the Notice of Hearing and Notice of Rights and return it to you for service.

**Step 6
Background Study**

Read the Notice to Proposed Guardians/Conservators Regarding Background Check Requirements (Form GAC 104) to determine if a background study needs to be completed.

If a background study is required and the Co-Guardians and/or Co-Conservators have completed a background study within the last five (5) years, fill out the Affidavit Regarding Background Study (Form GAC 102) and file with Court Administration.

If a background study is required, fill out the DHS Background Check Form (Form GAC 103).

**Step 7
File with Court Administration**

You will need to file the following forms with Court Administration:

- Petition for Appointment of Co-Guardians and/or Co-Conservators
- Acceptance of Appointment
- Order Appointing Co-Guardians and/or Co-Conservators
- Letters of Co-Guardians and/or Co-Conservators
- Notice of Hearing and Notice of Rights
- Affidavit(s) of Service (Form GAC 2-U) (after service is completed)
- GUVS Fee Waiver – Fee Waiver is based on the person subject to guardianship/conservatorship’s income NOT the Petitioner’s income.

If a background study is required, you may also need to file:

- DHS Background Check Form (Form GAC 103) OR
- Affidavit Regarding Background Study (Form GAC 102)

**Step 8
Make Copies, Serve Copies, and File Affidavit of Service**

NOTE: Originals must be filed with Court Administration. Make a copy of everything you file for your records.

Make enough copies for yourself and any interested persons that need to be served.

You must serve the Notice of Hearing and Notice of Rights and the Petition for Appointment of Co-Guardians and/or Co-Conservators on all interested persons, including the head of the facility if the Respondent is a patient of a state hospital, regional center, or any state operated service.

An “interested person” of the Respondent includes: spouse, parent, adult siblings, adult children including adult step-children of living spouse, person who lived with the Respondent for more than six (6) months, and other interested persons (see Petition and Minn. Stat. § 524.5-102, subd.7).

These documents must be personally served at least fourteen (14) days before the hearing or mailed (by first class mail) at least fourteen (14) days before the hearing to each interested person. NOTE: Papers *cannot* be served on a legal holiday.

If an interested person does not want to receive copies of notices or reports about the case, that person can fill out and sign a Waiver of Notices and Reports (Form GAC 110).

After you served all the interested persons, fill out the Affidavit of Service (Form GAC 2-U).

Ask Court Administration if a “Court Visitor” will be appointed to meet with the Respondent. If a Court Visitor is appointed, they will serve the Respondent with the Notice of Hearing and Notice of Rights and the Petition for Appointment of Co-Guardians and/or Co-Conservators.

If no Court Visitor is appointed, you are responsible for personally serving the Respondent the Notice of Hearing and Notice of Rights and the Petition for Appointment of Co-Guardians and/or Co-Conservators. You may not serve the Respondent. The person who personally served the Respondent will fill out the Affidavit of Service (Form GAC 2-U).

Step 9 Go to Your Hearing

To prepare for your hearing, it is a good idea to look at the court rules. You can visit a law library to read the court rules. For more information on how to prepare for the hearing, review Section IX, C, of the Conservatorship and Guardianship Manual (Form GAC 101).

You and the Respondent (unless excused by a physician and the judge) must go to court on the date set for the hearing. It is important to be on time and be prepared.

Step 10 Annual Reporting for Co-Guardian/Co-Conservator

Every year on the anniversary date of when the Letters of Co-Guardianship/Co-Conservatorship were issued, all Co-Guardians/Co-Conservators must work together to fill out and sign off on the annual reporting documents. If only one Co-Guardian or Co-Conservator completes the form, then Court Administration will send a deficiency notice. Failure to obtain all guardians/conservators' signatures and cooperation may result in the judge making a finding of contempt of court.

Conservatorship

- ***Inventory*** – This is the initial listing of assets of the person subject to conservatorship that you assumed responsibility for upon your appointment. This report is to be submitted no later than 60 days from the date your Letters of Co-Conservatorships were issued.
- ***Annual Account*** – This report covers the one-year period from anniversary date to anniversary date of your appointment each year. This report must be submitted no later than **60 days after your period ending date**.
- ***Annual Notice of Right to Petition for Termination or Modification of Conservatorship*** – This is a notice that must be served on the person subject to conservatorship each year. Upon submitting the annual account, you will also tell the Court that you have served this notice and the Bill of Rights.

Guardianship

- ***Personal Well-Being Report*** – This report covers the one-year period from anniversary date to anniversary date of appointment each year. This report must be submitted no later than 60 days of your period ending date.
- ***Annual Notice of Right to Petition for Termination or Modification of Guardianship*** – This is a notice that must be served on the person subject to guardianship each year. Upon submitting the Personal Well Being Report, you will also tell the Court that you have served this notice and the Bill of Rights.

These forms are available on www.mncourts.gov.

State of Minnesota

District Court
Probate Division

County of _____

Judicial District: _____

Court File No. _____

Case Type: Guardianship/Conservatorship

In Re: Guardianship
 Conservatorship of

Petition for Appointment of:
 Co-Guardians
 Co-Conservators

TO THE HONORABLE JUDGE OF THE DISTRICT COURT:

1. Petitioner's: Name: _____
Address _____

Telephone number: _____

Interest in this matter: _____

Relation to the Respondent: _____

2. Respondent's: Name: _____
Address: _____

Telephone number: _____

Age and date of birth: _____

3. A Guardianship/Conservatorship was established on: _____

4. The length of time the Co-Guardianship Co-Conservatorship is needed for:

Unlimited duration.

Limited duration for Co-Guardianship: _____ (length of time).

NOTE: If the Respondent is under 30 years old, a guardianship cannot exceed 72 months.

Limited duration for Co-Conservatorship: _____ (length of time).

5. If the petition is granted, the Respondent will not be moved or will be moved to:

6. The names and addresses of the Respondent's spouse and kin are:

a) Spouse:

Name: _____

Address: _____

Relationship: _____

b) Any adult the Respondent lived with for more than six (6) months: before the filing of this petition:

Name: _____

Address: _____

Relationship: _____

Name: _____

Address: _____

Relationship: _____

c) Kin: (parents, adult siblings, adult children including adult step-children of living spouse; and if none of these, then list the nearest next of kin. *See* Minn. Stat. § 524.5-102 subd. 7 (iv)).

Name: _____

Address: _____

Relationship: _____

Name: _____

Address: _____

Relationship: _____

Name: _____

Address: _____

Relationship: _____

d) Administrator: (if the Respondent is in a hospital, nursing home, VA unit, group home care agency, or other institution):

Name: _____

Address: _____

e) Legal representative (guardian/conservator, representative payee, trustee, or custodian of property):

Name: _____

Address: _____

Relationship: _____

f) Persons nominated, proposed, or confirmed by prior order, as guardian or conservator: (file applicable document with petition including a prior order, health care directive, or related document) Use more paper if you need more space.

Name: _____

Address: _____

Relationship: _____

Name: _____

Address: _____

Relationship: _____

Name: _____

Address: _____

Relationship: _____

(Complete paragraphs 7 and 17 only if you want Co-Guardians appointed.)

I am not asking the Court to appoint Co-Guardians (if selected, skip to paragraph #18.)

7. Co-Guardians of the Respondent should be appointed because:

A. The Respondent is an incapacitated person in that the Respondent lacks sufficient understanding or capacity to make personal decisions, and is unable to meet their personal needs. (Describe present general mental condition supporting this allegation): _____

B. The Respondent is unable to meet the Respondent's needs for medical care, nutrition, clothing, shelter, safety, even with appropriate technological and supported decision making assistance. (Describe behavior supporting this allegation): _____

C. Less restrictive means have been attempted and considered, but are not sufficient to meet the Respondent's identified needs. The description of what has been

attempted and considered, how long less restrictive means have been attempted, but have not been sufficient to meet the Respondent's needs are listed below.

8. The following powers are needed for the Co-Guardians to protect and supervise the person of the Respondent:

All of the rights and powers on behalf of a person subject to guardianship under Minn. Stat. § 524.5-313(c) paragraphs 1, 2, 3, 4, 5, 6, 7, 9, and 10. A limited guardianship is not appropriate because _____

(If the Co-Guardians are granted limited powers and duties, specify which powers and duties are vested in the Guardian by this Order.)

Have custody of the person subject to guardianship and establish the place of abode for the person subject to guardianship within or without the State, Minn. Stat. § 524.5-313(c)(1);

Provide for the care, comfort and maintenance needs of the person subject to guardianship, Minn. Stat. § 524.5-313(c)(2);

Take reasonable care of the clothing, furniture, vehicles and other personal effects of the person subject to guardianship, Minn. Stat. § 524.5-313(c)(3);

Give any necessary consent to enable, or to withhold consent for, the person subject to guardianship to receive necessary medical or other professional care, counsel, treatment or service, Minn. Stat. § 524.5-313(c)(4);

Approve or withhold approval of any contract, except for necessities, which the person subject to guardianship may make or wish to make (*only given if no conservator is appointed*), Minn. Stat. § 524.5-313(c)(5);

Exercise supervision authority over the person subject to guardianship, Minn. Stat. § 524.5-313(c)(6);

Apply on behalf of the person subject to guardianship for any assistance, services, or benefits available to the person subject to guardianship through any unit of government, Minn. Stat. § 524.5-313(c)(7);

- Establish an Achieving a Better Life Experience Act of 2014 account under section 529A of the Internal Revenue code (known as an ABLÉ account) for the person subject to guardianship, Minn. Stat. § 524.5-313(c)(9);
- Commence legal proceedings on behalf of and represent the person subject to guardianship in all civil proceedings (*only given if no conservator is appointed*), Minn. Stat. § 524.5-313(c)(10);
- (other) _____
_____;
and all other powers, duties and responsibilities conferred on the Guardian under applicable law.

9. The name, age, address, and phone number of each proposed Co-Guardians:

Co-Guardian #1 is: Name, age: _____
 Address: _____

 Telephone number: _____;

The proposed **Co-Guardian #1:**

- was appointed by prior order of the court;
- nominated by the Respondent,
- nominated by the Respondent's parent;
- nominated by the Respondent's spouse, or
- nominated by some other person.

Co-Guardian #2 is: Name, age: _____
 Address: _____

 Telephone number: _____;

The proposed **Co-Guardian #2:**

- was appointed by prior order of the court;
- nominated by the Respondent,
- nominated by the Respondent's parent;
- nominated by the Respondent's spouse, or
- nominated by some other person.

The proposed **Co-Guardians** are the most suitable and best qualified among those available and willing to discharge the trust because:

The proposed Co-Guardians are not excluded from appointment pursuant to Minn. Stat. § 524.5-309 (c).

The following information in Paragraphs #10 - 17 is required and applies to the proposed Co-Guardians and any employee of the proposed Co-Guardians who will be responsible for exercising powers and duties under the guardianship.

10. A. The proposed **Co-Guardian #1**, _____, anticipates charging the following rate for the performance of these services:

hourly, monthly, or flat rate of _____ and

has never been removed for cause from serving as a guardian or conservator.

OR

has been removed for cause from serving as a guardian or conservator and the court location and court file number are: _____

B. The proposed **Co-Guardian #2**, _____, anticipates charging the following rate for the performance of these services:

hourly, monthly, or flat rate of _____ and

has never been removed for cause from serving as a guardian or conservator.

OR

has been removed for cause from serving as a guardian or conservator and the court location and court file number are: _____

11. A. The proposed **Co-Guardian #1**, _____, is a professional guardian and a summary of the proposed **Co-Guardian #1's** educational background, employer's name and address, relevant work experience, and other experience is as follows: _____

The professional **Co-Guardian #1's** current customary rate per hour is _____.

B. The proposed **Co-Guardian #2**, _____, is a professional guardian and a summary of the proposed **Co-Guardian #2's** educational background, employer's name and address, relevant work experience, and other experience is as follows: _____

The professional **Co-Guardian #2**'s current customary rate per hour is _____.

12. A. The proposed **Co-Guardian #1**, _____,

has not applied for or held any professional licenses.

OR

has applied for or held the following professional licenses:

Type of License	Agency	License Number	Status

If the status of the license has been denied, conditioned, suspended, revoked, or cancelled, please explain why: _____

B. The proposed **Co-Guardian #2**, _____,

has not applied for or held any professional licenses.

OR

has applied for or held the following professional licenses:

Type of License	Agency	License Number	Status

If the status of the license has been denied, conditioned, suspended, revoked, or cancelled, please explain why: _____

13. A. The proposed **Co-Guardian #1**, _____,

has not been found civilly liable in an action involving fraud, misrepresentation, material omission, misappropriate, theft, or conversion.

OR

has been found civilly liable in an action involving fraud, misrepresentation, material omission, misappropriate, theft, or conversion.

List court location and court case number: _____

B. The proposed **Co-Guardian #2**, _____,

has not been found civilly liable in an action involving fraud, misrepresentation, material omission, misappropriate, theft, or conversion.

OR

has been found civilly liable in an action involving fraud, misrepresentation, material omission, misappropriate, theft, or conversion.

List court location and court case number: _____

14. A. The proposed **Co-Guardian #1**, _____,

has not filed nor has received protection under the bankruptcy laws in the last five (5) years.

OR

has filed or has received protection under the bankruptcy laws in the last five (5) years.

List court location and court case number: _____

B. The proposed **Co-Guardian #2**, _____,

has not filed nor has received protection under the bankruptcy laws in the last five (5) years.

OR

has filed or has received protection under the bankruptcy laws in the last five (5) years.

List court location and court case number: _____

15. A. The proposed **Co-Guardian #1**, _____,

does not have any outstanding civil monetary judgments.

OR

has outstanding civil monetary judgments.

List court location, court case number, and outstanding amount owed: _____

B. The proposed **Co-Guardian #2**, _____,

does not have any outstanding civil monetary judgments.

OR

has outstanding civil monetary judgments.

List court location, court case number, and outstanding amount owed: _____

16. A. The proposed **Co-Guardian #1**, _____,

does not have nor has had an order for protection or harassment restraining order issued against him / her.

OR

currently has or has had an order for protection or harassment restraining order issued against him / her.

List court location and court case number: _____

B. The proposed **Co-Guardian #2**, _____,

does not have nor has had an order for protection or harassment restraining order issued against him / her.

OR

currently has or has had an order for protection or harassment restraining order issued against him / her.

List court location and court case number: _____

17. A. The proposed **Co-Guardian #1**, _____,

has not been convicted of a gross misdemeanor or felony.

OR

has been convicted of a gross misdemeanor or felony.

List court case number and convicted offense: _____

B. the proposed **Co-Guardian #2**, _____

has not been convicted of a gross misdemeanor or felony.

OR

has been convicted of a gross misdemeanor or felony.

List court case number and convicted offense: _____

(Complete Paragraphs #18 - 29 only if you want Co-Conservators of the estate appointed.)

I am not asking the Court to appoint Co-Conservators (if selected, skip to paragraph # 30).

18. Co-Conservators of the Respondent are needed because:
- A. The Respondent is unable to manage property and business affairs because of an impairment in the ability to receive and evaluate information or make decisions, even with the use of appropriate technological assistance. (Describe present general mental condition supporting this allegation): _____

 - B. The Respondent has demonstrated behavioral deficits evidencing an inability to manage the Respondent's estate (Describe behavior supporting this allegation): _____

 - C. Less restrictive means have been attempted and considered, but are not sufficient to meet the Respondent's identified needs. The description of what has been attempted and considered, how long less restrictive means have been attempted, but have not been sufficient to meet the Respondent's needs is listed below:

 - D. Respondent has property that will be dissipated without proper management; or funds are needed for the support, care, education, health and welfare of (1) the Respondent; and/or (2) those entitled to the support of the Respondent.

19. The following powers are needed for Co-Conservators to protect and supervise the estate of the Respondent:

All of the rights and powers under Minn. Stat. § 524.5-417(c) paragraphs 1, 2, 3, 4, 5, 6, and 7. A limited conservatorship is not appropriate because _____

(If Co-Conservators are granted limited powers and duties, specify which powers and duties are vested in the Conservator by this Order.)

- Pay reasonable charges for the support, maintenance, and education of the person subject to conservatorship in a manner suitable to their station in life and the value of their estate, Minn. Stat. § 524.5-417(c)(1);
 - Pay out of the estate of the person subject to conservatorship all lawful debts of the person subject to conservatorship, Minn. Stat. § 524.5-417(c)(2);
 - Possess and manage the estate of the person subject to conservatorship, collect all debts and claims in favor of the person subject to conservatorship, or with the approval of the court compromise them, institute suit on behalf of the person subject to conservatorship and represent the person subject to conservatorship in all civil court proceedings, and invest all funds not currently needed for debts, charges, and management of the estate in accordance with the provisions of sections 48A.07, subdivision 6, 501C.0901, and 524.5-423, or as otherwise ordered by the court, Minn. Stat. § 524.5-417(c)(3);
 - Exchange or sell an undivided interest in real property, Minn. Stat. § 524.5-417(c)(4);
 - Approve or withhold approval of any contract, except for necessities, which the person subject to conservatorship may make or wish to make, Minn. Stat. § 524.5-417(c)(5);
 - Apply on behalf of the person subject to conservatorship for any assistance, services, or benefits available to the person subject to conservatorship through any unit of government, Minn. Stat. § 524.5-417(c)(6); and
 - Establish and exercise all powers over an Achieving a Better Life Experience Act of 2014 account under section 529A of the Internal Revenue code (known as an ABLÉ account), Minn. Stat. § 524.5-417(c)(7);
 - (other) _____
_____;
- and all other powers, duties and responsibilities conferred on the Conservator under applicable law.

20. Wages or Salary from the Respondent’s Employment, Minn. Stat. § 524.5-417(g):

- Any wages or salary the Respondent earns from employment during the conservatorship will be paid to and controlled by the Respondent. The co-conservators do not account for the Respondent’s wages and salary in the annual reporting.
- Any wages or salary the Respondent earns from employment during the Conservatorship will be part of the conservatorship estate. The co-conservators must include the Respondent’s wages and salary in the annual reporting.

21. The name, age, address, and phone number of each proposed Co-Conservators:

Co-Conservator #1 is: Name, age: _____
Address: _____

Telephone number: _____;

The proposed **Co-Conservator #1**:
 was appointed by prior order of the court;
 nominated by the Respondent,
 nominated by the Respondent's parent;
 nominated by the Respondent's spouse, or
 nominated by some other person.

Co-Conservator #2 is: Name, age: _____
Address: _____

Telephone number: _____;

The proposed **Co-Conservator #2**:
 was appointed by prior order of the court;
 nominated by the Respondent,
 nominated by the Respondent's parent;
 nominated by the Respondent's spouse, or
 nominated by some other person.

The proposed **Co-Conservators** are the most suitable and best qualified among those available and willing to discharge the trust because:

The proposed **Co-Conservators** are not excluded from appointment pursuant to Minn. Stat. § 524.5-413(d).

The following information in Paragraphs #22 - 29 is required and applies to the proposed Co-Conservators and any employee of the proposed Co-Conservators who will be responsible for exercising powers and duties under the conservatorship.

22. A. The proposed **Co-Conservator #1**, _____, anticipates charging the following rate for the performance of these services:

hourly, monthly, or flat rate of _____ and

has never been removed for cause from serving as a guardian or conservator.

OR

has been removed for cause from serving as a guardian or conservator and the court location and court file number are: _____

B. The proposed **Co-Conservator #2**, _____, anticipates charging the following rate for the performance of these services:

hourly, monthly, or flat rate of _____ and

has never been removed for cause from serving as a guardian or conservator.

OR

has been removed for cause from serving as a guardian or conservator and the court location and court file number are: _____

23. A. The proposed **Co-Conservator #1**, _____, is a professional conservator and a summary of the proposed conservator's educational background, employer's name and address, relevant work experience, and other experience is as follows: _____

The professional **Co-Conservator #1's** current customary rate per hour is _____

B. The proposed **Co-Conservator #2**, _____, is a professional conservator and a summary of the proposed conservator's educational background, employer's name and address, relevant work experience, and other experience is as follows: _____

The professional **Co-Conservator #2's** current customary rate per hour is _____

24. A. The proposed **Co-Conservator #1**, _____,

has not applied for or held any professional licenses.

OR

has applied for or held the following professional licenses:

Type of License	Agency	License Number	Status

If the status of the license has been denied, conditioned, suspended, revoked, or cancelled, please explain why: _____

B. The proposed **Co-Conservator #2**, _____,

has not applied for or held any professional licenses.

OR

has applied for or held the following professional licenses:

Type of License	Agency	License Number	Status

If the status of the license has been denied, conditioned, suspended, revoked, or cancelled, please explain why: _____

25. A. The proposed **Co-Conservator #1**, _____,

has not been found civilly liable in an action involving fraud, misrepresentation, material omission, misappropriate, theft, or conversion.

OR

has been found civilly liable in an action involving fraud, misrepresentation, material omission, misappropriate, theft, or conversion.

List court location and court case number: _____

B. The proposed **Co-Conservator #2**, _____,

has not been found civilly liable in an action involving fraud, misrepresentation, material omission, misappropriate, theft, or conversion.

OR

has been found civilly liable in an action involving fraud, misrepresentation, material omission, misappropriate, theft, or conversion.

List court location and court case number: _____

26. A. The proposed **Co-Conservator #1**, _____,
 has not filed nor has received protection under the bankruptcy laws in the last 5 years.

OR

has filed or has received protection under the bankruptcy laws in the last 5 years.

List court location and court case number: _____

B. The proposed **Co-Conservator #2**, _____,

has not filed nor has received protection under the bankruptcy laws in the last 5 years.

OR

has filed or has received protection under the bankruptcy laws in the last 5 years.

List court location and court case number: _____

27. A. The proposed **Co-Conservator #1**, _____,

does not have any outstanding civil monetary judgments.

OR

has outstanding civil monetary judgments.

List court location, court case number, and outstanding amount owed: _____

B. The proposed **Co-Conservator #2**, _____,

does not have any outstanding civil monetary judgments.

OR

has outstanding civil monetary judgments.

List court location, court case number, and outstanding amount owed: _____

28. A. The proposed **Co-Conservator #1**, _____,

does not have nor has had an order for protection or harassment restraining order issued against him/her.

OR

currently has or has had an order for protection or harassment restraining order issued against him/her.

List court location and court case number: _____

B. The proposed **Co-Conservator #1**, _____,

does not have nor has had an order for protection or harassment restraining order issued against him / her.

OR

currently has or has had an order for protection or harassment restraining order issued against him / her.

List court location and court case number: _____

29. A. Other than a petty misdemeanor or traffic offense, the proposed **Co-Conservator #1**, _____,

has not been convicted of a crime.

OR

has been convicted of a crime.

List court case number and convicted offense: _____

B. Other than a petty misdemeanor or traffic offense, the proposed **Co-Conservator #2**, _____,

has not been convicted of a crime.

OR

has been convicted of a crime.

List court case number and convicted offense: _____

30. The probable value and the general character of the assets of the Respondent are:

Homestead:	\$ _____
Other Real Estate:	\$ _____
Money:	\$ _____
Investments:	\$ _____
Personal Property:	\$ _____
Other:	\$ _____
TOTAL:	\$ _____

31. The probable amount of the debts of the Respondent is \$ _____.

32. The Respondent is (not) a patient at a State Hospital for persons with mental illness; is (not) a person with developmental disabilities or dependent and neglected ward of the Commissioner of Human Services; and is (not) under the temporary custody of the Commissioner of Human Services.
33. The Respondent appears to understand the nature and effect of voting and should maintain the right to vote.

OR

The Respondent does not appear to understand the nature and effect of voting and the court should determine Respondent's capacity to vote.

WHEREFORE, Petitioner respectfully requests the Court schedule a time and place for hearing this petition and, after the hearing, an order appointing:

_____, _____
Co-Guardians of the Respondent with the powers and duties described in allegations numbered 8 above;

_____, _____
Co-Conservators of the Respondent with the powers and duties described in allegations numbered 19 above.

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

Dated: _____, 20__

County and State where signed

Petitioner

Name: _____

Address: _____

City/State/Zip: _____

E-mail address: _____

STATE OF MINNESOTA
COUNTY OF _____

DISTRICT COURT
TENTH 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 Co-Guardian Co-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 guardian/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: _____

Date of Birth: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Email address: _____

By Corporation:

_____ (“Corporation”) is a corporation under the Laws of the State of Minnesota. As a condition to receiving letters as Co-Guardian Co-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: _____

Title: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Email address: _____

STATE OF MINNESOTA
COUNTY OF _____

DISTRICT COURT
TENTH 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 Co-Guardian Co-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 guardian/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: _____

Date of Birth: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Email address: _____

By Corporation:

_____ (“Corporation”) is a corporation under the Laws of the State of Minnesota. As a condition to receiving letters as co 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: _____

Title: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Email address: _____

STATE OF MINNESOTA
COUNTY OF _____

DISTRICT COURT
TENTH JUDICIAL DISTRICT
PROBATE DIVISION

Court File No. _____
Case Type: Guardianship/Conservatorship

In Re: Guardianship
 Conservatorship of

Order Appointing:
 Co-Guardian
 Co-Conservator
(Uncontested)

This matter came on for hearing before the district court on _____ on a petition seeking appointment of Co-Guardians Co-Conservators for the Respondent named above. Petitioner appeared personally with the Petitioner’s attorney, _____. The Respondent appeared personally with the Respondent’s attorney, _____. The matter, having been considered by the Court, and the Court being duly advised in the premises now makes the following:

FINDINGS OF FACT

1. FINDING OF INCAPACITY:

Guardianship: (i) The Respondent is incapacitated in that the Respondent lacks sufficient understanding or capacity to make decisions concerning the Respondent’s personal needs for medical care, nutrition, clothing, shelter or safety. The Respondent’s inability is reflected by the following facts: _____

and (ii) the Respondent is unable to meet the Respondent’s needs for medical care, nutrition, safety and shelter. The Respondent’s inability is reflected by the following facts: _____

Conservatorship: (i) The Respondent is unable to manage property and business affairs because of an impairment in the ability to receive and evaluate information or make decisions, even with the use of appropriate technological assistance. The Respondent’s inability is reflected by the following facts: _____

and (ii) the Respondent has property which will be dissipated without proper management and funds are needed for the support, care, education, health, and welfare of the Respondent or of individuals who are entitled to the individual's support and that protection is necessary or desirable to obtain or provide money. This conclusion is supported by the following facts: _____

2. LESS RESTRICTIVE ALTERNATIVES

Guardianship: No appropriate alternative to guardianship exists that is less restrictive of the Respondent's civil rights and liberties including, but not limited to, the use of appropriate technological assistance, supported decision making, community or residential services, or appointment of a health care agent under § 145C.01, subd. 2. The Respondent's identified needs cannot be met by less restrictive means is reflected by the following facts: _____

Conservatorship: No appropriate alternative to conservatorship exists that is less restrictive of the Respondent's civil rights and liberties including, but not limited to, the use of appropriate technological assistance, supported decision making, the use of a representative payee, trusts, banking or bill-paying assistance, appointment of an attorney-in-fact under Minn. Stat. § 523.01, or a protective arrangement under Minn. Stat. § 524.5-412. The Respondent's identified needs cannot be met by less restrictive means is reflected by the following facts: _____

3. The Respondent is incapable of exercising the following rights and powers:

- All of the rights and powers under Minn. Stat. § 524.5-313 subd.(c) for a person subject to guardianship,
- All of the rights and powers under Minn. Stat. § 524.5-417 subd. (c) for a person subject to conservatorship.

A limited guardianship or conservatorship is not appropriate because _____

(If the Respondent is capable of performing some but not all powers and duties, specify which powers and duties CANNOT be performed by the Respondent.)

- Establish the place of abode within or outside the State;
- Provide for the Respondent's care, comfort and maintenance needs;
- Take reasonable care of the Respondent's clothing, furniture, vehicles and other personal effects;
- Give any necessary consent to enable, or to withhold consent for, the necessary medical or other professional care, counsel, treatment or service;
- Exercise supervisory authority over the Respondent, but may not restrict the ability of the Respondent to communicate, visit or interact with others unless good cause exists to believe the restriction is necessary to prevent significant harm to the Respondent;
- Pay reasonable charges for the support, maintenance, and education of the Respondent in a manner suitable to the Respondent's station in life and the value of the Respondent's estate;
- Pay out of the Respondent's estate all just and lawful debts of the Respondent;
- Possess and manage the estate of the Respondent, collect all debts and claims in favor of the Respondent, or to settle them with court approval, start a lawsuit on behalf of the Respondent and represent the Respondent in non-criminal court proceedings, or invest the Respondent's assets not currently needed for debts, charges, and management of the estate;
- Exchange or sell an undivided interest in real property;
- Approve or withhold approval of any contract, except for necessities, which the Respondent may make or wish to make;
- Apply on behalf of the Respondent for any assistance, services, or benefits available to the Respondent through any unit of government;
- Establish an Achieving a Better Life Experience Act of 2014 account under section 529A of the Internal Revenue Code (known as ABLE account); and
- Exercise all powers over an Achieving a Better Life Experience Act of 2014 account under section 529A of the Internal Revenue Code (known as ABLE account);
- Start a lawsuit on behalf of the Respondent, represent the Respondent in non-criminal court proceedings, and settle claims with court approval (**only given if no conservator is appointed**);
- (other) _____

4. The Respondent is (not) a patient of a State Hospital for persons with mental illness or a person with developmental disabilities or dependent or neglected ward of the Commissioner of Human Services, or under the temporary custody of the Commissioner of Human Services.

5. The Respondent is or is not under thirty (30) years old.

6. The Respondent is in need of:

- Co-Guardians to protect the Respondent's person;

Co-Conservators to protect the Respondent's estate.

7. The Court finds that the:

A. Co-Guardians are:

The most suitable and best qualified among those available and willing to discharge the trust because: _____

Not excluded from appointment pursuant to Minn. Stat. § 524.5-309(c) or such Guardian has been approved by prior Order of a court pursuant to Minn. Stat. § 524.5-302(d);

B. Co-Conservators are:

The most suitable and best qualified among those available and willing to discharge the trust because: _____

Not excluded from appointment pursuant to Minn. Stat. § 524.5-413(d).

8. Respondent's right to vote:

The Respondent appears to understand the nature and effect of voting and maintains the right to vote.

OR

The Respondent does not appear to understand the nature and effect of voting and Respondent's right to vote is revoked. The basis for this is as follows:

CONCLUSIONS OF LAW

1. The Respondent's court appointed attorney is no longer needed at this time and should be discharged.

Guardianship:

2. Clear and convincing evidence establishes the Respondent is an incapacitated person whose needs cannot be met by less restrictive means.

3. Co-Guardians of _____ should be appointed.
(Respondent)

4. The Co-Guardianship should be for:

- an unlimited duration as the Respondent is thirty (30) years old or over; or
- a limited duration, not exceeding a period of seventy-two (72) months, as the Respondent is under thirty (30) years old; or
- a limited duration. Other: _____.

Conservatorship:

5. Clear and convincing evidence establishes the Respondent is unable to manage property and business affairs because of an impairment in the ability to receive and evaluate information or make decisions.
6. A preponderance of the evidence establishes (check all that apply):
 - the Respondent has property that will be wasted or dissipated unless management is provided;
 - money is needed for the support, care, education, health and welfare of the Respondent or individuals who are entitled to the Respondent's support, care, education, health and welfare of Respondent or of individuals who are entitled to Respondent's support and that protection is necessary or desirable to obtain or provide money.
7. The Respondent's identified financial needs cannot be met by less restrictive means.
8. Co-Conservators of _____ should be appointed.
(Respondent)
9. The Co-Conservatorship should be for:
 - an unlimited duration; or
 - a limited duration. Other: _____.

ORDER

NOW, THEREFORE, IT IS ORDERED:

1. That: _____, _____,
are hereby appointed Co-Guardians of _____;

 _____, _____,
are hereby appointed Co-Conservators of _____.
2. That: letters of Co-Guardianship shall issue to _____,
_____ upon the filing of the Acceptance of
Appointment and such letters shall reflect that the Co-Guardians are appointed by
the Court.

letters of Co-Conservatorship shall issue to _____, upon the filing of the Acceptance of Appointment and bond, if any.

3. Appointment of powers and duties:

The Co-Guardians shall have the power and duty to:

Exercise all of the rights and powers on behalf of the Respondent under Minn. Stat. § 524.5-313 subd. (c) paragraphs 1, 2, 3, 4, 5, 6, 7, 9 and 10. A limited guardianship is not appropriate because _____

(If the Co-Guardian are granted limited powers and duties, specify which powers and duties are vested in the Co-Guardians by this Order.)

Have custody of the Respondent and establish the place of abode for the Respondent within or outside the State, Minn. Stat. § 524.5-313(c)(1);

Provide for the Respondent's care, comfort and maintenance needs, Minn. Stat. § 524.5-313(c)(2);

Take reasonable care of the Respondent's clothing, furniture, vehicles and other personal effects, Minn. Stat. § 524.5-313(c)(3);

Give any necessary consent to enable, or to withhold consent for, the Respondent to receive necessary medical or other professional care, counsel, treatment or service, Minn. Stat. § 524.5-313(c)(4);

Approve or withhold approval of any contract, except for necessities, which the Respondent may make or wish to make (***only given if no conservator is appointed***), Minn. Stat. § 524.5-313(c)(5);

Exercise supervisory authority over the Respondent, but may not restrict the ability of the Respondent to communicate, visit or interact with others unless good cause exists to believe the restriction is necessary to prevent significant harm to the Respondent, Minn. Stat. § 524.5-313 (c)(6);

Apply on behalf of the Respondent for any assistance, services, or benefits available to the Respondent through any unit of government (***only given if no conservator is appointed***), Minn. Stat. § 524.5-313(c)(7);

Establish an Achieving a Better Life Experience Act of 2014 account under section 529A of the Internal Revenue Code (known as ABLE account), Minn. Stat. § 524.5-313(c)(9);

Start a lawsuit on behalf of the Respondent, represent the Respondent in non-criminal court proceedings, and settle claims with court approval (***only given if no conservator is appointed***), Minn. Stat. § 524.5-313(c)(10);

(other) _____;
_____;
and to exercise all other powers, duties and responsibilities conferred on the Co-Guardians under applicable law.

The Co-Conservators shall have the power and duty to:

Exercise all of the rights and powers under Minn. Stat. § 524.5-417 subd. (c) paragraphs 1, 2, 3, 4, 5, 6 and 7. A limited conservatorship is not appropriate because

(If the Co-Conservators are granted limited powers and duties, specify which powers and duties are vested in the Co-Conservator by this Order.)

Pay reasonable charges for the support, maintenance, and education of the Respondent in a manner suitable to the Respondent's station in life and the value of the Respondent's estate, Minn. Stat. § 524.5-417(c)(1);

Pay out of the Respondent's estate all lawful debts of the Respondent, Minn. Stat. § 524.5-417(c)(2);

Possess and manage the estate of the Respondent, collect all debts and claims in favor of the Respondent, or settle them with court approval, start a lawsuit on behalf of the Respondent and represent the Respondent in non-criminal court proceedings, and invest all funds not currently needed for debts, charges, and management of the estate pursuant to Minn. Stat. §§ 48A.07, subd. 6, 501C.0901, and 524.5-423, or as otherwise ordered by the court, Minn. Stat. § 524.5-417(c)(3);

Exchange or sell an undivided interest in real property, Minn. Stat. § 524.5-417(c)(4);

Approve or withhold approval of any contract, except for necessities, which the Respondent may make or wish to make, Minn. Stat. § 524.5-417(c)(5);

Apply on behalf of the Respondent for any assistance, services, or benefits available to the Respondent through any unit of government, Minn. Stat. § 524.5-417(c)(6);

Establish and exercise all powers over an Achieving a Better Life Experience Act of 2014 account under section 529A of the Internal Revenue code (known as an ABLE account), Minn. Stat. § 524.5-417(c)(7);

(other) _____;

and all other powers, duties and responsibilities conferred on the Co-Conservators under applicable law.

4. Duration of the Co-Guardianship and/or Co-Conservatorship:

- The duration of the Co-Guardianship is
 unlimited; OR
 limited to a term of _____ months years. Minn. Stat. § 524.5-310(d).
- The duration of the Co-Conservatorship is
 unlimited; OR
 limited to a term of _____ months years. Minn. Stat. § 524.5-409(1)(a).

5. The Respondent's right to vote is retained revoked until further order of the court.

6. The court appointed attorney for the Respondent is hereby discharged.

7. Any wages and salary the Respondent earns from employment shall shall not be part of the conservatorship estate. Minn. Stat. § 524.5-417(g).

8. Within thirty (30) days of the date of this Order, Co-Conservators shall file a bond in the amount of \$_____.

9. Responsibilities of Co-Guardians and/or Co-Conservators:

- A. Within fourteen (14) days of this Order, the Co-Guardians and/or Co-Conservators must provide the Respondent and the Respondent's counsel a copy of the order of appointment and a notice advising the Respondent of the right to appeal the order.
- B. Within sixty (60) days of the date the Letters of Co-Conservatorship were issued, the Co-Conservators must file with the Court, and serve on the Respondent and all interested persons, a detailed inventory of the estate subject to Conservatorship.
- C. The Co-Guardians and/or Co-Conservators must notify the Court of any changes under Minn. Stat. §§ 524.5-316(b) and 524.5-420(d) within thirty (30) days of the change.
- D. Within one (1) day of awareness of the Respondent's death, the Co-Guardians must notify the Court and all interested persons of the death. If there is no acting guardian and the Co-Conservators become aware of the Respondent's death, the Co-Conservators must notify the Court and all interested persons as soon as is reasonably practical.
- E. Every year, the Co-Guardians must file with the Court, and serve on all interested persons (1) a Personal Well-Being report, (2) Annual Notice of Rights, and (3) Bill of Rights within thirty (30) days of the date the Letters of Co-Guardianship were issued.
- F. Every year, the Co-Conservators must file with the Court, and serve on all interested persons (1) Annual Account, (2) Annual Notice of Rights, and (3) Bill of Rights

within thirty (30) days of the date the Letters of Co-Conservatorship were issued.

- G. The Co-Guardians must give notice prior to any sale or disposition of the Respondent's clothing, furniture, vehicles, or other personal effects pursuant to Minn. Stat. § 524.5-313(c)(3).
- H. Every five (5) years, the Co-Guardians and/or Co-Conservators and all individuals under their employment who are responsible for exercising powers and duties under the Co-Guardianship/Co-Conservatorship, must complete the background study consent form or file an affidavit of prior background study with a copy of a current background study.

BY THE COURT:

Judge of the District Court Date

STATE OF MINNESOTA
COUNTY OF _____

DISTRICT COURT
TENTH JUDICIAL DISTRICT
PROBATE DIVISION

Court File No. _____
Case Type: Guardianship/Conservatorship

In Re: Guardianship
 Conservatorship of

**Notice of Hearing
and Notice of Rights**

A petition has been filed requesting appointment of _____,
_____, as Co-Guardians of the person; _____,
_____ as Co-Conservators of the estate; of _____
(Respondent herein). A copy of the petition is attached. Appointment of Co-Guardians or Co-
Conservators is not evidence of incompetence.

Respondent's Rights and Obligations: The Respondent must be physically present at the hearing unless excused by the court. The Respondent has a right to attend the hearing, to be represented by an attorney, to oppose the petition and to present evidence. If the Respondent wishes to be represented by an attorney, the Respondent must either obtain one of Respondent's own choosing or if the Respondent has no funds to pay an attorney, the Respondent may call the Court to request an attorney at _____ (phone number) Monday through Friday, 8:00 a.m. to 4:30 P.M.

Petition for Co-Guardians: If the petition is granted, the Respondent will be found unable to manage the Respondent's personal affairs and the proposed Co-Guardians or some other suitable and competent person or persons will be appointed Co-Guardians. Several of the Respondent's rights will be given to the Co-Guardians, including the right to make health care decisions for the Respondent, determine where the Respondent shall live, and if no conservator is appointed, to make contracts for the Respondent.

Petition for Co-Conservators: If the petition is granted, the Respondent will be found unable to manage the Respondent's financial affairs and the proposed Co-Conservators or some other suitable and competent person or persons will be appointed Co-Conservators. Several of the Respondent's rights will be given to the Co-Conservators, including the right to manage and control money and other property, and to make contracts for the Respondent.

YOU ARE HEREBY NOTIFIED that a hearing on the petition will be held at
o'clock m. on _____ at _____
_____.

Dated: _____

Court Administrator

By: _____

This Notice must be personally served on the Respondent with a copy of the petition by the Court Visitor at least fourteen days prior to the hearing; and this Notice must also be served on all interested persons as defined in Minn. Stat. § 524.5-102, subd. 7 by mail postmarked not less than fourteen days prior to the hearing.

Court File No. _____

AFFIDAVIT OF SERVICE

_____ says that on _____, _____ the undersigned court visitor and/or person served the foregoing Notice of Hearing and Notice of Rights upon _____ by handing to and leaving a true and correct copy of this Notice with the Respondent, and displaying the signature of the court on the original Notice to Respondent.

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

Dated: _____

Signature

Name: _____

Title: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Email address: _____

County and state where signed

STATE OF MINNESOTA
COUNTY OF _____

DISTRICT COURT
TENTH JUDICIAL DISTRICT
PROBATE DIVISION

Court File No. _____
Case Type: Guardianship/Conservatorship

In Re: Guardianship
 Conservatorship of

**Waiver of Right to Court Appointed
Attorney**

I have been notified of my right to be represented by an attorney at the hearing on the petition requesting the appointment of Co-Guardians and/or Co-Conservators, and I hereby waive my right for a Court appointed attorney.

I understand that the court can appoint an attorney for me and that the attorney fee will be paid by the County, but I do not want to be represented by an attorney.

Dated: _____, 20_____

Signed

Court Visitor Certification: I read this notice and waiver of right to attorney to the proposed person subject to guardianship and/or person subject to conservatorship and explained this notice to such person. I believe the proposed person subject to guardianship and/or person subject to conservatorship has made a knowing and informed waiver of the right to an attorney.

Court Visitor

Date

State of Minnesota

**District Court
Probate Division**

County _____

Judicial District: _____
Court File Number: _____
Case Type: _____ Guardianship/Conservatorship

In Re: the Guardianship /
 Conservatorship of

Affidavit of Service
(Guardianship/Conservatorship)

My name is _____, and I am at least 18 years old. I served papers for this case as follows:

Person under Guardianship or Conservatorship:	Forms Served:
Name: _____	_____
Served at _____	_____
(location): _____	_____
Date Of Service: _____	_____
How Served: <input type="checkbox"/> By Mail (United States Mail) <input type="checkbox"/> By Personal Service (hand-delivered)	

Person of Interest with the Court:	Forms Served:
Name: _____	_____
Served at _____	_____
(location): _____	_____
Date of Service: _____	_____
How Served: <input type="checkbox"/> By Mail (United States Mail) <input type="checkbox"/> By Personal Service (hand-delivered)	

Person of Interest with the Court:	Forms Served:
Name: _____	_____
Served at (location): _____	_____
_____	_____
Date of Service: _____	_____
How Served: <input type="checkbox"/> By Mail (United States Mail) <input type="checkbox"/> By Personal Service (hand-delivered)	

Person of Interest with the Court:	Forms Served:
Name: _____	_____
Served at (location): _____	_____
_____	_____
Date of Service: _____	_____
How Served: <input type="checkbox"/> By Mail (United States Mail) <input type="checkbox"/> By Personal Service (hand-delivered)	

Person of Interest with the Court:	Forms Served:
Name: _____	_____
Served at (location): _____	_____
_____	_____
Date of Service: _____	_____
How Served: <input type="checkbox"/> By Mail (United States Mail) <input type="checkbox"/> By Personal Service (hand-delivered)	

If you need more space, add another sheet of paper.

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

Dated

County and state where signed

Signature of Person Who Served the Forms

Name: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Email: _____

Notice to Proposed Guardians/Conservators Regarding Background Check Requirements

Minn. Stat. § 524.5-118 requires a background study on proposed guardians and conservators for the purpose of assisting the court in determining whether an appointment as a guardian or conservator is in the best interests of the respondent / person subject to guardianship / person subject to conservatorship. The study is waived if the proposed guardian or conservator is:

1. a state agency or county;
2. a parent or guardian of a person who has a developmental disability, if the parent or guardian has raised the person in the family home until the time the petition is filed, unless counsel appointed for the person recommends a background study; or
3. a bank with trust powers, bank and trust company, or trust company.

If applicable, the enclosed form (Background Study) should be completed immediately and submitted, with the appropriate fee, to the Department of Human Services.

State of Minnesota

County

District Court

Judicial District: _____

Court File Number: _____

Case Type: Guardianship/Conservatorship

**In the Matter of the Guardianship/
Conservatorship of:**

**Affidavit Regarding
Background Study**

_____, states as follows:

1. A Petition has been filed in this matter requesting my appointment as Guardian/Conservator for the above named person subject to guardianship and/or conservatorship.
2. I have been the subject of a background study within the past 5 years pursuant to Minn. Stat. § 524.5-118.
3. A true and correct copy of the background study is attached to this affidavit.
4. I have not been arrested, charged with any crime, convicted of any crime, the subject of any criminal investigation, or the subject of any investigation regarding maltreatment of vulnerable adults or maltreatment of minors since date of the background study, except as follows:

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

Date: _____

County and State where signed:

Affiant's Signature

Address: _____

City/State/Zip: _____

Telephone: (_____) _____

E-mail address: _____

REQUESTING COURT

[Empty box for County]

COUNTY

[Empty box for Court File Number]

COURT FILE NUMBER

PROPOSED PROTECTED PERSON / WARD

[Empty box for First Name]

FIRST NAME

[Empty box for Middle Name]

MIDDLE NAME

[Empty box for Last Name]

LAST NAME

PROPOSED CONSERVATOR / GUARDIAN

[Empty box for First Name]

FIRST NAME

[Empty box for Middle Name]

MIDDLE NAME

[Empty box for Last Name]

LAST NAME

LIST ANY OTHER NAMES BY WHICH THE PROPOSED CONSERVATOR / GUARDIAN HAS BEEN KNOWN

[Empty box for Other Name 1]

[Empty box for Other Name 2]

[Empty box for Other Name 3]

[Empty box for Other Name 4]

[Empty box for Other Name 5]

[Empty box for Other Name 6]

[Empty box for Address]

ADDRESS

[Empty box for City]

CITY

[Empty box for State]

STATE

[Empty box for Zip Code]

ZIP CODE

[Empty box for Date of Birth]

DATE OF BIRTH mm/dd/yyyy

[Empty box for Social Security Number]

SOCIAL SECURITY NUMBER (OPTIONAL)

[Empty box for Drivers License Number]

DRIVERS LICENSE NUMBER (OPTIONAL)

[Empty box for State]

STATE THAT ISSUED THE LICENSE

[Empty box for Race/Ethnicity]

RACE/ETHNICITY (OPTIONAL)

[Empty box for Telephone Number]

TELEPHONE NUMBER

[Empty box for Gender]

M F
GENDER

[Empty box for Professional Licenses]

List professional licenses held from the list included in instructions on page 2. Include board name, license number, and the state that issued the license.

List states other than Minnesota where you have resided for full or partial years (including wintering) within the past ten years: _____

If you listed any states above, this form must be accompanied by classifiable fingerprints. See instructions on page 2.

I give consent to the Minnesota Department of Human Services to conduct a background study on me as provided in Minnesota Statutes, section 524.5-118, and to release the results of the study to the court.

SIGNATURE OF PROPOSED CONSERVATOR/GUARDIAN

DATE

The Court hereby certifies that this is an *in forma pauperis* proceeding (person only), and qualifies for exemption from fee payment pursuant to Minn. State. Sec. 524.5-118, subd. 1 (f) (1). CERTIFIED BY: _____

GUARDIAN AND CONSERVATOR BACKGROUND STUDY CONSENT / INFORMATION FORM

BACKGROUND STUDY REQUIREMENT:

Minnesota Statutes, section 524.5-118, requires a background study on you for the purpose of assisting the court in determining whether your appointment or continued appointment as a guardian or conservator is in the best interests of the ward or protected person. The background study will include:

- A review of criminal records held by the Minnesota Bureau of Criminal Apprehension (BCA) and the Minnesota Department of Human Services (DHS);
- A review of records of substantiated maltreatment of vulnerable adults or minors held by DHS;
- A search of the the databases listed in 524.5-118 subd. 2a (see item 4 below) to determine if you have ever held a professional license directly related to the responsibilities of a professional fiduciary in Minnesota, and any other state in which you have resided in the past ten years; and
- A search of the Federal Bureau of Investigation's (FBI) national criminal records repository if you have resided (including wintering) in any state other than Minnesota in the previous ten years; or if the BCA information indicates you are a multistate offender, or your offender status is undetermined or blank.

NOTIFICATION OF RIGHTS: You have the following rights:

- The right to be informed that the court will request a background study on you for the purpose of determining whether your appointment or continued appointment is in the best interests of the ward or protected person;
- The right to be informed of the results of the study and obtain from the court a copy of the results; and
- The right to challenge the accuracy and completeness of information provided to the court by DHS or BCA by filing a challenge with the appropriate agency under Minnesota Statutes, section 13.04, subdivision 4. Please note that some challenges may be precluded by Minnesota Statutes, section 256.045, subdivision 3.

FEES AND PAYMENTS

- The fee for each study is \$50 if you have not lived outside of Minnesota in the past ten years. Please note that if the BCA information indicates you are a multistate offender, or your offender status is undetermined or blank, a set of classifiable fingerprints and an additional \$30 fee will be required to complete an FBI record search. If this search is required, you will be notified by DHS in writing and the additional payment will be requested at that time.
- The fee for each study is \$130 if you have resided outside of Minnesota for any period of time during the ten years preceding the background study, and this form must be accompanied by a set of classifiable fingerprints. The \$30 fee for processing the fingerprints for the FBI check is included in this fee.
- There is no fee for cases approved by the court to proceed in forma pauperis for guardians as provided in Minnesota Statutes, section 524.5-118. For conservators of the estate, the fee is paid by the estate.

INSTRUCTIONS

1. All information on page 1 of this form is required, unless marked optional. Please type or print legibly.
2. The proposed guardian or conservator must sign and date page 1 of this form.
3. If the proposed guardian or conservator has resided outside of Minnesota in the last ten years (including wintering), this form must be accompanied by a set of classifiable fingerprints. Fingerprint cards can be obtained at the county court administrator's office or by calling the Background Studies Division: 651-431-6620.
4. If the proposed guardian or conservator has ever held any of the following licenses, include them in the space provided on page 1: Lawyers Responsibility Board; State Board of Accountancy; Board of Social Work, Psychology, Nursing, Medical Practice, Dentistry, or Marriage and Family Therapy; Department of Education, Commerce, or Human Services; Peace Officer Standards and Training (POST) Board.
5. Mail form with appropriate fee(s) or court verification that the case is proceeding in forma pauperis to:

Department of Human Services
Attn: Guardian Background Studies
PO Box 64172
St. Paul, MN 55164-0242