

INTERVIEW SHEET FOR GUARDIANSHIP OF THE PERSON AND/OR ESTATE

Petitioner's Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Business Phone: _____

Name of Incapacitated Minor or Adult: _____

Address of Incapacitated Minor or Adult: _____

City: _____ County: _____

State: _____ Zip Code: _____

Birth Date of Minor or Adult: _____

Current Age of Minor or Adult: _____

If minor or adult is residing in institution or hospital, secure the following information:

Name of Institution or Hospital: _____

Address: _____

City: _____ County: _____

State: _____ Zip Code: _____

Name of Superintendent: _____

LIST CLOSE RELATIVES OF MINOR OR ADULT AND THEIR RELATIONSHIP TO THE PERSON FOR WHOM GUARDIANSHIP IS BEING SOUGHT, ALONG WITH THEIR CURRENT ADDRESS WHERE NOTICE CAN BE SENT TO THEM.

Name: _____

Relationship: _____

Address: _____

Will this Individual Consent? Yes _____ No _____

If so, Name and Address of Bank: _____

LIST MINOR OR ADULT'S REAL ESTATE:

Parcel #1:

Common Address: _____

City: _____ County: _____ Zip Code: _____

Approximate Value: _____

Parcel #2:

Common Address: _____

City: _____ County: _____ Zip Code: _____

Approximate Value: _____

LIST MINOR OR ADULT'S CHECKING AND SAVINGS ACCOUNTS:

Name and Address of Bank: _____

Type of Account: _____ Account No.: _____

Was Account Jointly Held or Individual? _____

If Joint, with whom? _____

Approximate Balance: _____

Name and Address of Bank: _____

Type of Account: _____ Account No.: _____

Was Account Jointly Held or Individual? _____

If Joint, with whom? _____

Approximate Balance: _____

LIST VEHICLES OWNED BY MINOR OR ADULT:

Year: _____ Make and Model: _____

Approximate Value: _____

Year: _____ Make and Model: _____

Approximate Value: _____

LIST STOCKS OR BONDS OWNED BY ADULT OR MINOR:

Name of Company: _____

Number of Shares: _____ Common or Preferred: _____

Certificate Numbers and Shares: _____

Fair Market Value per Share: _____ Total Value: _____

Name of Company: _____

Number of Shares: _____ Common or Preferred: _____

Certificate Numbers and Shares: _____

Fair Market Value per Share: _____ Total Value: _____

List Minor's or Adult's Other Assets: _____

Is Guardian of the Person also being requested? _____

If so, who is to be Appointed? _____

If not Petitioner, list name and address of this individual: _____

Is Petitioner requesting appointment as guardian of the estate? _____

If not, who is to be appointed in that capacity? _____

List Address: _____

Business Phone: _____ Home Phone: _____

Will Guardian be posting trust oath or bond: _____

If bond, proposed amount of bond: _____

Name and Address of Surety Company to be contacted: _____

Miscellaneous Remarks or Information: _____
