**IN RE: Guardianship of**

**Case No:** **PRDL**

**Ward Division:**

**WORKSHEET**

# APPOINTMENT OF GUARDIAN OF PERSON AND PROPERTY

F.S.744.334, 733,312, 744.3125 and Probate R. 5.020(b), 5.560(a) and 5.60

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Petition for Appointment of Guardian Information** | | | **YES** | **NO** |
| Provide petitioner’s name, resident address and post office address. Relationship to AIP: | | |  |  |
| Facts to establish venue. | | |  |  |
| Name, age and address of alleged incapacitated person. {proposed ward} | | |  |  |
| Name and address of AIP’s/ward’s next of kin. | | |  |  |
| Provide the nature of the ward’s incapacity and extent of the guardianship.  limited  plenary | | |  |  |
| Nature and value of property/assets subject to this guardianship. | | |  |  |
| Provide reasons why other alternatives to this guardianship are insufficient. {effective July 1, 2020} | | |  |  |
| Name, residence and post office address of the proposed guardian. Relationship is | | |  |  |
| Proposed guardian’s previous association with the alleged incapacitated person. | | |  |  |
| Statement that the proposed guardian is qualified to serve or that a willing and qualified guardian has not been located. | | |  |  |
| Reasons why the proposed guardian should be appointed. | | |  |  |
| Is the petition a verified statement and is it signed by the petitioner? | | |  |  |
| Is the petition signed by the attorney for the petitioner with his/her bar number, address and phone number stated? | | |  |  |
| A list of preexisting orders DNR or Advanced Directives have been filed with dates and clarification as to status. {effective July 1, 2020} | | |  |  |
| A description of the steps taken to identify and locate the preexisting orders DNR & Advanced Directives. {effective July 1, 2020} | | |  |  |
| Has a petition to appoint a standby guardian been filed? **If yes, indicate date filed & DIN #** | | |  |  |
| **Oath of Guardian and Designation of Resident Agent** been filed? FL Probate R. 5.600. Required of all guardians prior to appointment. | | |  |  |
| **NOTES:** | | |  |  |
|  |  |
| **Professional Guardian**  **YES** or mark as N/A if this section does not apply **N/A** | | | **YES** | **NO** |
| Did the professional guardian file the Petition? {note if petition was filed by Professional or Public Guardian} | | |  |  |
| Is there currently a **Volusia County** **Professional Guardian Credential file** established for this proposed guardian? {Provide the file number or indicate N/A if not a professional guardian **#** **PRBD** \*this is not required, it is a convenience file; or Certificate from OPPG re: compliance has been filed. | | |  |  |
| Does the Application contain the names, case number and circuit of all wards for whom he/she is acting? | | |  |  |
| **Non-Professional Guardian**  **YES** or mark as N/A if this section does not apply **N/A** | | |  |  |
| **Application** by all proposed guardians filed? DIN # | | |  |  |
| Does the Application state the guardian’s qualifications to serve? | | |  |  |
| **Credit Report or Petition to Waive? FS 744.3135** {prior to appointment } DIN # | | |  |  |
| **Level 2 background screening report from FDLE or Petition to Waive? FS 744.3135** {prior to appointment }  DIN # | | |  |  |
| Clerk have you contacted the judicial assistant with the information necessary to set a hearing on the appointment of the guardian? | | |  |  |
| **NOTES:** | | |  |  |

Proposed order and letters submitted at the time of this review and their content has been reviewed  YES  NO