PETITION FOR THE APPOINTMENT OF AN EMERGENCY GUARDIAN AND/OR CONSERVATOR FOR A PROPOSED WARD

INSTRUCTIONS

I. Specific Instructions

1. This form is to be used for filing a Petition for the Appointment of an Emergency Guardian and/or Conservator for a Proposed Ward pursuant to O.C.G.A. §§ 29-4-14 and/or 29-5-14.

2. In determining if this Court is the proper place to bring this action, Petitioner(s) should consult Georgia law, including but not limited to, Chapters 4, 5 and 11 of Title 29, as applicable.

3. Regarding the need for the pre-hearing appointment of an Emergency Guardian/Emergency Conservator, O.C.G.A. §§ 29-4-15 (c) (5) and 29-5-15 (c) (5) provide as follows: If the court determines that there is probable cause to believe that the Proposed Ward is in immediate need of an emergency guardian, the court shall appoint a pre-hearing emergency guardian to serve until the emergency hearing, with or without prior notice to the Proposed Ward, but only if the threatened risk is so immediate and the potential harm so irreparable that any delay is unreasonable and the existence of the threatened risk and potential for irreparable harm is certified by the affidavit of a physician licensed to practice medicine under Chapter 34 of Title 43, a psychologist licensed to practice under Chapter 39 of Title 43, or a licensed clinical social worker. However, pending the emergency hearing, the court shall order that no withdrawals may be made from any account on the authority of the Proposed Ward's signature without the court's prior approval and that the emergency conservator shall not expend any funds of the Proposed Ward without prior court approval.

4. Further, if a pre-hearing emergency guardian/emergency conservator is appointed to serve until the emergency hearing, then such guardian and/or conservator shall, prior to the issuance of Letters of Emergency Guardianship/Emergency Conservatorship, take an oath and post such bond as the court may require.

5. In any case involving the creation of a Conservatorship when the Proposed Ward owns real property in Georgia, a certificate of creation of conservatorship will be completed by the Clerk of the Probate Court and filed with the Clerk of the Superior Court of each county in which the Proposed Ward owns real property within thirty (30) days of the date of such order.

6. The burden of proof is on the Petitioner to present clear and convincing evidence that the Proposed Ward lacks sufficient capacity to make or communicate significant responsible decisions concerning his or her health or safety and is in need of a guardianship AND/OR that there is an immediate, clear, and substantial risk of death or serious physical injury, illness, or disease unless an emergency guardian is appointed and/or that the Proposed Ward lacks sufficient capacity to make or communicate significant responsible decisions concerning the management of his or her property and is in need of a conservatorship AND that there is an immediate, substantial risk of irreparable waste or dissipation of the estate unless an emergency conservator is appointed.

7. The Certificate to the Secretary of State page is to be used only when a determinative finding has been made that the Proposed Ward's voting rights should be removed due to the lack of capacity of the ward. The order of the Court must be modified to reflect that this right was removed. The certificate must be mailed to the Secretary of State.

8. The Certificate to the GBI page shall be used in all cases where a Guardianship and/or Conservatorship is/are established. Individuals so listed in this database will be prohibited from obtaining a Georgia Weapons Carry License. In the event the ward's rights are restored, such restoration of rights shall be sent to the GBI, so the database can be updated. Only the Certificate needs to be sent to the GBI and not the Guardianship Order.

9. According to Probate Court Rule 5.6 (A) unless the court specifically assumes the responsibility, it is the responsibility of the moving party to prepare the proper citation and deliver it properly so that it can be served according to law. All pages after the Notice regarding Uniform Probate Court Rule 5.6 (A) are to be completed by the moving party, unless otherwise directed by the court.

10. An oath must be administered by a Probate Judge or Clerk (the oath cannot be administered by a notary public). Use Georgia Probate Court Supplement 4 for the oath. The oath is not included in this form. Georgia Probate Court Standard Form 53, Commission to Administer Oath, can be used if the oath is to be administered by a court outside the State of Georgia.

II. General Instructions

General instructions applicable to all Georgia Probate Court Standard Forms are available in each Probate Court or at www.gaprobate.gov, labeled GPCSF 1.

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE:	)	
	)	
_____,	)	**ESTATE NO. _____**
PROPOSED WARD	)	

PETITION FOR APPOINTMENT OF AN EMERGENCY GUARDIAN AND/OR EMERGENCY CONSERVATOR FOR A PROPOSED WARD

[NOTE: Unless there are two or more Petitioners, the affidavit beginning on page 11 must be completed by a physician, psychologist, or licensed clinical social worker and based on an examination within fifteen (15) days prior to the filing of this Petition.]

The Petition of _____,

whose relationship to the above-named Proposed Ward is_____, whose

domicile is _____,
Street City County State Zip Code

and mailing address is _____,
Street City County State Zip Code

AND ***[initial either (a) or (b) below]***

_____ (a) The Petition of _____,

whose relationship to the above Proposed Ward is _____,

whose domicile is_____,
Street City County State Zip Code

and mailing address is _____.
Street City County State Zip Code

OR

_____ (b) Attached hereto as pages 11 and 12 and made a part of this Petition is the completed affidavit of _____, a physician, psychologist licensed to practice in Georgia or licensed clinical social worker, who has examined the Proposed Ward within fifteen (15) days prior to the filing of this Petition, and shows to the Court the following:

1.

The Proposed Ward

_____

[Full name of Proposed Ward] First Middle Last

whose age is _____, date of birth is _____,

Social Security Number is _____, domicile is

_____

Street City County State Zip Code

presently located at _____,

Street City County State Zip Code

which is a _____ and can be contacted at

[type of facility, if applicable]

telephone number: _____.

2.

(a) Will the Proposed Ward be moved within the next three (3) days? *[Select One]* ☐ Yes ☐ No

(b) Is the Proposed Ward a citizen of a foreign country? *[Select One]* ☐ Yes ☐ No

If you answer "Yes" to (a) and/or (b), provide the necessary information below:

(a) The following is the address where the Proposed Ward is anticipated to be moved:

_____

Street City County State Zip Code Telephone Number

(b) The Proposed Ward is a citizen of a foreign country, said country being: _____ (if an emergency guardianship or conservatorship is granted, pursuant to The Vienna Convention, the Probate Court must notify the consul).

3.

a. Is an emergency guardianship necessary because the Proposed Ward lacks sufficient capacity to make or communicate significant responsible decisions concerning his or her health or safety and there is an immediate and substantial risk of death or serious physical injury, illness, or disease unless an emergency guardian is appointed? *[Select One]* ☐ Yes ☐ No

b. Is an emergency conservatorship necessary because the Proposed Ward lacks sufficient capacity to make or communicate significant responsible decisions concerning the management of his or her property and there is an immediate substantial risk of irreparable waste or dissipation of the estate unless an emergency conservator is appointed? *[Select One]* ☐ Yes ☐ No

If you answer "Yes" to (a) and/or (b), provide the facts that support the claim of the need for an emergency guardian/emergency conservator (continued on next page):

[NOTE: Pursuant to O.C.G.A. §§ 29-4-15(b) and 29-5-14(b), the Court shall dismiss the Petition if the Petitioner(s) does/do not allege facts that cause the Court to believe that the Proposed Ward is in need of an emergency guardian/emergency conservator as stated above. The Petition cannot be granted unless sufficient facts are presented that support the claim for the need for the appointment of an emergency guardian/emergency conservator. While an attached physician's, psychologist's, or social worker's affidavit is permissible, the Petitioner(s) MUST specifically allege sufficient facts to support the granting of this Petition.]

4.

(a) It is in the best interest of the Proposed Ward for the following individual to be appointed emergency guardian: _____

(b) It is in the best interest of the Proposed Ward for the following individual to be appointed emergency conservator: _____

5.

(a) Is it necessary, in addition to the appointment of an emergency guardian, after notice and hearing, for the Court to immediately appoint a pre-hearing emergency guardian? *[Select One]* ☐ Yes ☐ No

(b) Is it necessary, in addition to the appointment of an emergency conservator, after notice and hearing, for the Court to immediately appoint a pre-hearing emergency conservator? *[Select One]* ☐ Yes ☐ No

If you answer "Yes" to (a) and/or (b), provide the following on a separate page:

1. The reasons why a pre-hearing emergency guardian/emergency conservator is necessary;
2. Who should be appointed as a pre-hearing emergency guardian/emergency conservator;
3. The specific powers that should be granted to the pre-hearing emergency guardian and/or emergency conservator; and
4. Why such powers are necessary to prevent irreparable harm to the Proposed Ward.

6.

The reason(s) why the procedures for the appointment of a non-emergency (permanent) guardianship and/or conservatorship are inadequate to protect the Proposed Ward and/or his or her property is/are:

7.

Will a petition for permanent guardianship/conservatorship be filed? *[Select One]* ☐ Yes ☐ No

If you answer "Yes," provide the details of such filing, including the Petitioner's name, county of filing, expected date of filing, etc.:

8.

The foreseeable duration of the Proposed Ward's incapacity is _____ _____ and the Court should grant the emergency guardian/conservator the following powers and duties that do not exceed those absolutely necessary to respond to the immediate threatened risk(s) described above:

9.

(a) Has a Power of Attorney been created by anyone for the Proposed Ward? *[Select One]* ☐ Yes ☐ No

(b) Has a trust been created by anyone for the Proposed Ward? *[Select One]* ☐ Yes ☐ No

(c) Has another document been created by anyone that gives another person authority to act on the Proposed Ward's behalf? *[Select One]* ☐ Yes ☐ No

(d) Does anyone else have the authority to act on behalf of the Proposed Ward? *[Select One]* ☐ Yes ☐ No

If you answer "Yes" to (a), (b), (c) and/or (d), provide the following information:

1. The full name of each individual with the authority to act under a power of attorney, trust, or otherwise. A name should be listed for each affirmative answer in this paragraph;
2. The complete address of each individual with the authority to act under a power of attorney, trust, or otherwise. An address should be listed for each affirmative answer in this paragraph;
3. The telephone number of each individual with the authority to act under a power of attorney, trust, or otherwise. A telephone number should be listed for each affirmative answer in this paragraph;
4. Attach a copy of each document that creates such authority; and

For each of the individuals named in this paragraph, state whether or not it appears he or she is willing and able to act on behalf of the Proposed Ward and include the facts that give rise to that appearance.

10.

[NOTE: If the appointment of an emergency conservator is sought and no petition for permanent conservatorship is being filed simultaneously, this form must be completed.]

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

REAL PROPERTY

[Indicate if property is jointly owned and, if so, with whom]

Description	County	State	Joint Owner, if any	**Approximate Equity:**
Parcel 1:				$_____
Parcel 2:				$_____
Parcel 3:				$_____

INCOME FROM ALL SOURCES

Yearly Total:

Social Security per year:	$_____
SSI *[Supplemental Security Income]* per year:	$_____
Retirement benefits per year:	$_____
VA benefits per year:	$_____
Other income per year (e.g., alimony, annuity, or trust distributions):	$_____
Interest, dividend, or investment income:	$_____
Yearly Total of All Income:	$_____ 0.00
<u>Total of Income Covered by Conservatorship Period:</u>	$_____

PERSONAL AND INTANGIBLE PROPERTY

[Indicate if property is jointly owned and, if so, with whom]

(1) Checking/Savings/Money Market/Certificates of Deposit/ Liquid Accounts:

Bank/Financial Institution/Broker	Account Number	Joint Owner, if any	
			$_____
			$_____
			$_____
			$_____

(2) Stocks/Bonds/Investments (including retirement and profit-sharing accounts):

(a) Held by Brokers:

Brokerage Firm/Institution	Account Number	Joint Owner, if any	
			$_____
			$_____
			$_____
			$_____

(b) Privately Held:

Company/Issuer	Number of Shares	Joint Owner, if any	
			$_____
			$_____

(3) Automobiles

Year/Make/Model	V.I.N.	Joint Owner, if any	
			$_____
			$_____

(4) Other assets of significant value:

Description	Joint Owner, if any	
		$_____
		$_____

Total Value of Personal and Intangible Property: $ 0.00

DEBTS AND OTHER LIABILITIES

PERSONAL AND INTANGIBLE PROPERTY

The Proposed Ward has the following debts and/or liabilities: **Approximate Balance:**

(1) Secured Debts

Obligor/Payee	Collateral	Joint Owner, if any	
			$_____
			$_____
			$_____

(2) Unsecured Debts

Obligor/Payee	Account Number	Joint Owner, if any	
			$_____
			$_____
			$_____

Total Debts and Other Liabilities of Proposed Ward: $ 0.00

AVERAGE MONTHLY LIABILITIES AND EXPENSES

Household:

Care Facility/Rent/Mortgage Payments: $_____

Property Taxes/Insurance: $_____

Utilities/Lawn Care/Pest Control: $_____

Miscellaneous Household Food: $_____

Total Credit Account and Other Debt Payments: $_____

Other *[specify]* _____: $_____

Automotive/Transportation:

Fuel and Repairs: $_____

Tags, License Fees, Insurance: $_____

Bus/Train/Taxi Fares: $_____

Minors or Other Dependents of Proposed Ward:

Childcare: $_____

School Tuition/Supplies/Expenses/Lunches: $_____

Clothing/Diapers/Grooming/Hygiene: $_____

Medical/Dental/Prescription: $_____

Other Insurance:

Health: $_____

Life/Disability: $_____

Other *[specify]* _____: $_____

Proposed Ward's Other Expenses:

Laundry/Clothing/Grooming/Hygiene: $_____

Medical/Dental/Prescriptions/Medications: $_____

Entertainment/Vacations/Subscriptions/Dues: $_____

Personal Caretakers/Cleaning Personnel: $_____

Total Expenses: $_____

PAYMENTS TO CREDITORS

Is the Proposed Ward behind on any debt payments? *[Select One]* ☐ Yes ☐ No

If so, payee and amount: _____ $_____

SUMMARY

(1) Average Monthly Income: $_____

(2) Average Monthly Expenses: $_____

11.

This Court has jurisdiction to hear this action under Georgia law, and particularly under Chapters 4, 5, and 11 of Title 29 because:

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

WHEREFORE, Petitioner(s) pray(s):

1. that service be perfected as required by law;
2. that the Court appoint legal counsel and an evaluator for the Proposed Ward and order an evaluation as required by law;
3. that the Court order an emergency hearing to be conducted not sooner than three (3) days nor later than five (5) days after the filing of this Petition;
4. that an emergency guardian/emergency conservator be appointed for the Proposed Ward; and
5. that, if requested, the Court immediately appoint a pre-hearing emergency guardian/emergency conservator with such powers and duties as the Court shall direct.

_____	_____
Signature of First Petitioner	Signature of Second Petitioner, if any
_____	_____
Printed Name	Printed Name
_____	_____
_____	_____
Mailing Address	Mailing Address
_____	_____
Telephone Number	Telephone Number

Signature of Attorney _____

Printed Name of Attorney _____

Address _____

_____

Telephone Number _____ State Bar #_____

VERIFICATION

GEORGIA, _____ COUNTY

Personally appeared before me the undersigned Petitioner(s) who, after being duly sworn, state(s) that the facts set forth in the foregoing Petition for the Appointment of an Emergency Guardian and/or Emergency Conservator for a Proposed Ward (and the attached Exhibit(s)) are true and correct.

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

_____
Signature of First Petitioner

_____
NOTARY/CLERK OF PROBATE COURT
My Commission Expires _____

_____
Printed Name of First Petitioner

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

_____
Signature of Second Petitioner

_____
NOTARY/CLERK OF PROBATE COURT
My Commission Expires _____

_____
Printed Name of Second Petitioner

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE:	)	
	)	
_____,	)	**ESTATE NO. _____**
PROPOSED WARD	)	

CONSENT TO SERVE AS EMERGENCY GUARDIAN/EMERGENCY CONSERVATOR

RE: Petition for the Appointment of an Emergency Guardian and/or Emergency Conservator for the above-named Proposed Ward

I, _____, having been nominated as emergency guardian, and I, _____, having been nominated as emergency conservator of the above-named Proposed Ward, do hereby consent to serve as emergency guardian and/or emergency conservator and pre-hearing emergency guardian and/or pre-hearing emergency conservator if so appointed.

_____	_____
Signature Proposed Emergency Guardian	Signature Proposed Emergency Conservator
_____	_____
Printed Name	Printed Name
_____	_____
_____	_____
Mailing Address	Mailing Address
_____	_____
Telephone Number	Telephone Number

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE:	)	
	)	
_____,	)	**ESTATE NO. _____**
PROPOSED WARD	)	

RE: Petition for Appointment of an Emergency Guardian and/or Emergency Conservator for the above-named Proposed Ward

AFFIDAVIT OF PHYSICIAN, PSYCHOLOGIST, OR CLINICAL SOCIAL WORKER FOR EMERGENCY GUARDIANSHIP AND/OR EMERGENCY CONSERVATORSHIP

I, being first duly sworn, depose and say that I am a physician licensed to practice under Chapter 34 of Title 43 of the Official Code of Georgia Annotated, a psychologist licensed to practice under Chapter 39 of Title 43 of the Official Code of Georgia Annotated, or a licensed clinical social worker; that my office address is _____ and that I have examined the above-named Proposed Ward on the _____ day of _____, 20____.
[NOTE: The examination on which this affidavit is based must occur WITHIN FIFTEEN (15) DAYS prior to the filing of the Petition.]

I found him/her to be incapacitated by reason of:

to the extent that said Proposed Ward:

[initial all that apply]

_____ (a) *[for emergency guardianship:]* lacks sufficient capacity to make or communicate significant responsible decisions concerning his or her health or safety and there is an immediate and substantial risk of death or serious physical injury, illness, or disease unless an emergency guardian is appointed, and *[if applicable]*

_____ (i) **the threatened risk is so immediate and the potential harm so irreparable that any delay is unreasonable and a pre-hearing guardian should be appointed.**

_____ (b) *[for emergency conservatorship:]* lacks sufficient capacity to make or communicate significant responsible decisions concerning the management of his or her property and there is an immediate, substantial risk of irreparable waste or dissipation of the estate unless an emergency conservator is appointed, and *[if applicable]*

_____ (ii) **the threatened risk is so immediate and the potential harm so irreparable that any delay is unreasonable and a pre-hearing conservator should be appointed.**

The following facts support my opinion of incapacity and the existence of (an) immediate threat(s) or risk(s) to the Proposed Ward:

The foreseeable limits on the duration of such incapacity are:

Optional: Affiant's opinions as to any other limitations on the emergency guardianship and/or emergency conservatorship are:

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

_____
Signature of Physician/Psychologist/LCSW

_____
Printed Name of Evaluator

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

_____
NOTARY/CLERK OF PROBATE COURT
My Commission Expires _____

NOTICE:

1. *As to the Certificate to the Secretary of State, this page is to be used **only** when a determinative finding has been made that voting rights should be removed due to the lack of capacity of the Proposed Ward. The Order must be modified to reflect that this right was removed. The certificate must be mailed to the Secretary of State.*

2. *As to the Certificate to the GBI, this page shall be used in all cases where a Guardianship and/or Conservatorship is established. Individuals so listed in this database will be prohibited from obtaining a firearm permit. In the event the Proposed Ward's rights are restored, such restoration of rights **shall** be sent to the GBI so the database can be updated. Only the Certificate needs to be sent to the GBI and not the Guardianship Order.*

NOTICE

THE FOLLOWING PAGES ARE TO BE COMPLETED BY THE PETITIONER (MOVING PARTY) UNLESS OTHERWISE DIRECTED BY THE COURT.

SEE PROBATE COURT RULE 5.6 (A).

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE:	)	
	)	
_____,	)	**ESTATE NO. _____**
PROPOSED WARD	)	

ORDER FOR EVALUATION, APPOINTMENT OF COUNSEL, AND NOTICE OF HEARING

The above and foregoing Petition for the Appointment of an Emergency Guardian and/or Emergency Conservator for a Proposed Ward having been read and considered, and it appearing that there is sufficient evidence to believe that the Proposed Ward is in need of an emergency guardian and/or emergency conservator within the meaning of O.C.G.A. §§ 29-4-14 and/or 29-5-14,

IT IS HEREBY ORDERED that _____ (physician) (psychologist) (licensed clinical social worker), telephone number _____, is appointed to evaluate the above-named Proposed Ward at ___:_____ _____m., on _____, 20____ at *[location name and address]* _____. In compliance with Georgia law and federal law, including HIPAA, healthcare providers shall permit the above evaluator to have access to the Proposed Ward's medical records;

IT IS FURTHER ORDERED that the Clerk shall immediately notify the Proposed Ward of these proceedings by having all pleadings, as well as this order, personally served on the Proposed Ward; and

IT IS FURTHER ORDERED that the above-named Proposed Ward shall submit to an evaluation at the time and place stated above and that a written report shall be furnished to the Court and made available to the parties within seventy-two (72) hours after this order being issued.

IT IS FURTHER ORDERED that the evaluator shall explain the purpose of the evaluation to the Proposed Ward.

IT IS FURTHER ORDERED that _____, attorney at law, telephone number _____ is hereby appointed to represent the Proposed Ward.

IT IS FURTHER ORDERED that an emergency hearing shall be conducted in the Probate Court of _____ County, courtroom _____, *[address]* _____, Georgia OR at the following address: _____ _____ at ____:_____ _____m., on _____, 20___, which is not sooner than three (3) days nor later than five (5) days after the filing of the Petition.

[initial all that apply]

_____ (a) IT IS FURTHER ORDERED that, based on the affidavit filed with the Petition, it appears that the threatened risk of death or serious physical injury, illness, or disease of the Proposed Ward is so immediate and the potential harm so irreparable that any delay is unreasonable, and _____ is named as pre-hearing emergency guardian of the Proposed Ward, to serve pending the hearing as scheduled above. Emergency Letters of Guardianship shall be issued upon said pre-hearing emergency guardian taking the oath.

_____ (b) IT IS FURTHER ORDERED that, based on the affidavit filed with the Petition, it appears that the threatened risk of waste or dissipation of the Proposed Ward's property is so immediate and the potential harm so irreparable that any delay is unreasonable, and _____ is named as pre-hearing emergency conservator of the Proposed Ward, to serve pending the hearing as scheduled above. Emergency Letters of Conservatorship shall be issued upon said pre-hearing emergency conservator posting a surety bond in the amount of $_____ and taking the oath.

[initial all that apply]

_____ (i) IT IS FURTHER ORDERED that, pending the emergency hearing, the Court hereby orders that no withdrawals may be made from any account on the authority of the Proposed Ward's signature without the Court's prior approval and that the pre-hearing emergency conservator shall not expend any funds of the Proposed Ward without prior Court approval.

NOTICE TO PROPOSED WARD:

This is to notify you of a proceeding initiated in this Court by _____ _____ seeking to appoint:

[initial all that apply]

_____ (a) an emergency guardian for your person; and/or
_____ (b) an emergency conservator for your property.

BY THIS ORDER, THE COURT HAS APPOINTED AN ATTORNEY TO REPRESENT YOU AND HAS SCHEDULED A HEARING. YOU AND YOUR ATTORNEY HAVE THE RIGHT TO ATTEND ANY HEARING HELD ON THIS MATTER.

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

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

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

SO ORDERED this _____day of _____, 20____.

_____
Judge of the Probate Court

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE:	)	
	)	
_____,	)	**ESTATE NO. _____**
PROPOSED WARD	)	

CERTIFICATE OF SERVICE OF ORDER FOR EVALUATION; APPOINTMENT OF COUNSEL; AND NOTICE OF HEARING

[NOTE: Notice is required to be mailed to the Proposed Ward's guardian ad litem (if any) and attorney.]

I certify that I have this date mailed (unless otherwise noted) in an envelope with proper postage affixed thereto for first-class delivery a copy of the foregoing Petition for the Appointment of an Emergency Guardian and/or Emergency Conservator for a Proposed Ward and order to the following parties at the address listed below:

This _____ day of _____, 20____.

_____
Clerk of the Probate Court

_____
_____
Address

_____
Telephone Number

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE:	)	
	)	
_____,	)	**ESTATE NO. _____**
PROPOSED WARD	)	

ORDER FOR DISMISSAL

The above and foregoing Petition for the Appointment of an Emergency Guardian and/or Emergency Conservator for a Proposed Ward having been read and considered pursuant to O.C.G.A. §§ 29-4-15 and/or 29-5-15, and based on the Petition and prior to the court-ordered evaluation, it appears that there is not probable cause to believe that the Proposed Ward is in need of an emergency guardian and/or emergency conservator; therefore,

IT IS HEREBY ORDERED that the Petition is dismissed.

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

SO ORDERED this _____ day of _____, 20____.

_____
Judge of the Probate Court

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE:	)	
	)	
_____,	)	**ESTATE NO. _____**
PROPOSED WARD	)	

CERTIFICATE OF SERVICE OF ORDER OF DISMISSAL

[NOTE: Notice is required to be mailed to the Proposed Ward's guardian ad litem (if any) and attorney.]

I certify that I have this day mailed (unless otherwise noted) in an envelope with proper postage affixed thereto for first class delivery a copy of the Petition, the medical affidavit, and* order for dismissal to the Proposed Ward and other persons listed below as required by law, and to the following parties at the address listed below:

This _____ day of _____, 20____.

_____
Clerk of the Probate Court

_____
_____
Address

_____
Telephone Number

* not necessary if dismissal is after evaluation.

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE:	)	
	)	
_____,	)	**ESTATE NO. _____**
PROPOSED WARD	)	

COURT APPOINTED EVALUATOR'S REPORT

EMERGENCY GUARDIANSHIP AND/OR EMERGENCY CONSERVATORSHIP PROCEEDINGS

PETITIONER(S): _____

PROPOSED WARD: _____

In compliance with the Order of the Probate Court of _____ County, dated _____, 20_____, I performed an evaluation of the above-named Proposed Ward on _____, 20_____. This evaluation took place at: _____. The evaluation continued for _____ (minutes)(hours). I explained the purpose of the evaluation to the Proposed Ward.

The following questions and tests were utilized in the evaluation:

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

The following is a description of the Proposed Ward's mental and physical state and condition, including all observed facts considered:

The following is a description of the overall social condition of the Proposed Ward, including support, care, education, well-being, and the functional capabilities of the Proposed Ward, determined by the evaluator:

The following are my findings as to the needs of the Proposed Ward and their foreseeable duration:

[initial all that apply]

_____ (a) I find the Proposed Ward to be incapacitated by reason of

to the extent that said Proposed Ward:

____ (i) *[for emergency guardianship]* lacks sufficient capacity to make or communicate significant responsible decisions concerning his or her health or safety and there is an immediate, clear, and substantial risk of death or serious physical injury, illness, or disease unless an emergency guardian is appointed; and/or

____ (ii) *[for emergency conservatorship]* lacks sufficient capacity to make or communicate significant responsible decisions concerning the management of his or her property and there is an immediate, substantial risk of irreparable waste or dissipation of the Proposed Ward's estate unless an emergency conservator is appointed,

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

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

_____

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

_____

Printed Name

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

_____
NOTARY/CLERK OF PROBATE COURT
My Commission Expires _____

[NOTE: This report must be filed with the Probate Court no later than seventy-two (72) hours after the Order for Evaluation being issued.]

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE:	)	
	)	
_____,	)	**ESTATE NO. _____**
PROPOSED WARD	)	

STIPULATION AND WAIVER BY PROPOSED WARD'S ATTORNEY

IN RE: PETITION FOR THE APPOINTMENT OF AN EMERGENCY GUARDIAN AND/OR EMERGENCY CONSERVATOR FOR THE ABOVE-NAMED PROPOSED WARD

The undersigned, as the attorney representing the above-named Proposed Ward in these proceedings

[initial all that apply]

_____ (a) does hereby stipulate into evidence the affidavit prepared by _____, *[name of affiant evaluator]* being the evaluation report ordered by the Court in this matter, and hereby waives the appearance of such affiant at any hearing concerning the said Petition;

_____ (b) does hereby stipulate into evidence the affidavit(s) prepared by _____, *[name of affiant evaluator]* which is the affidavit referred to in the introductory paragraph (b) of the Petition, and hereby waives the appearance of such affiant at any hearing concerning the said Petition; and/or

_____ (c) does further waive the appearance of my client, the Proposed Ward, at said hearing.

This _____ day of _____, 20____.

Signature of Attorney _____

Printed name of Attorney _____

Address _____

_____

Telephone Number _____ State Bar # _____

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE:	)	
	)	
_____,	)	**ESTATE NO. _____**
PROPOSED WARD	)	

FINAL ORDER

A hearing was held on the above-referenced Petition for the Appointment of an Emergency Guardian and/or Emergency Conservator for a Proposed Ward on _____, 20_____, and after considering the pleadings, the evaluation report, and the evidence taken at the hearing, the Court makes the following:

FINDINGS OF FACT

1.

All procedural requirements of O.C.G.A. §§ 29-4-14 and/or 29-5-15 have been met.

2.

The above-named ward (does) (does not) lack sufficient capacity to make or communicate significant responsible decisions concerning the management of his or her health and safety and there is an immediate and substantial risk of death or serious physical injury, illness, or disease due to *[state how or why lacks capacity]*:

The above-named ward (does) (does not) lack sufficient capacity to make or communicate significant responsible decisions concerning the management of his or her property and there is an immediate, substantial risk of irreparable waste or dissipation of the ward's property due to *[state how or why lacks capacity]*:

Such need appears to be limited to the following number of days: _____.

3.

The current value of the personal property and income covering the emergency period of the ward, is approximately $_____. The ward has an interest in real property in the following locations:

(a) _____County, (state) _____;
(b) _____County, (state) _____;
(c) _____County, (state) _____.

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

4.

Petitioner(s) moved the Court to appoint _____ as emergency guardian and _____ as emergency conservator asserting those individual(s) should serve because:

[initial all that apply]

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

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

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

_____ (b) Another individual with higher preference, being _____, was nominated/designated to serve as guardian by someone other than the ward, and/but it (is) (is not) in the best interest of the ward to appoint him/her guardian because _____ _____.

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

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

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

_____ (d) Another individual with higher preference, being _____, was nominated/designated to serve as conservator by someone other than the ward, and/but it (is) (is not) in the best interest of the ward to appoint him/her conservator because _____ _____.

5.

The Petitioner(s) asserted that the following additional powers pursuant to O.C.G.A. §§ 29-4-23 (b) and 29-5-23 (c) were absolutely necessary to respond to the immediate and threatened risks alleged in the Petition:

For the emergency guardian: _____ _____;

For the emergency conservator: _____ _____.

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

[initial all that apply]

_____ (a) an emergency guardian because the ward lacks sufficient capacity to make or communicate significant responsible decisions concerning his or her health or safety and there is an immediate and substantial risk of death or serious physical injury, illness, or disease unless an emergency guardian is appointed.

_____ (b) an emergency conservator because the ward lacks sufficient capacity to make or communicate significant responsible decisions concerning the management of his or her property and there is an immediate, substantial risk of irreparable waste or dissipation of the ward's property unless an emergency conservator is appointed.

The duration of the emergency guardianship and/or emergency conservatorship is for

[initial one]

_____ (a) sixty (60) days, or until the effective date of the appointment of permanent guardianship and/or conservatorship, or until the emergency guardian(s) and/or conservator(s) are removed, or the dismissal of a Petition for the appointment of an emergency guardian/emergency conservator, whichever occurs first.

_____ (b) a date certain prior to the time identified in (a) above, being _____, 20_____.

IT IS ORDERED that _____should be, and hereby is/are, appointed emergency guardian(s) and _____ should be, and hereby is/are, appointed emergency conservator(s) of the ward because: _____ _____. Letters of emergency guardianship and/or emergency conservatorship shall issue to such emergency guardian(s) and/or emergency conservator(s) upon taking the required oath and upon the emergency conservator's(s') posting bond in the amount of $_____.

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

IT IS FURTHER ORDERED that the emergency guardian(s) shall have only the following powers and duties determined by the Court to be absolutely necessary to respond to the immediate threatened risk: _____ _____.

IT IS FURTHER ORDERED that the emergency conservator(s) shall have only the following powers and duties determined by the Court to be absolutely necessary to respond to the immediate threatened risk: _____ _____.

IT IS FURTHER ORDERED that the emergency guardian(s) shall file the following reports with the Court: _____
_____.

IT IS FURTHER ORDERED that the emergency conservator(s) shall file the following reports with the Court: _____
_____.

IT IS FURTHER ORDERED that a copy of this Order shall be hand delivered or mailed by first class mail to the ward, the ward's attorney, the guardian ad litem, if any, the emergency guardian and/or emergency conservator, the Petitioner(s) and his/her/their attorney(s), if any.

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

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

SO ORDERED this _____ day of _____, 20____.

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

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE:	)	
	)	
_____,	)	**ESTATE NO. _____**
PROPOSED WARD	)	

CERTIFICATE OF SERVICE OF FINAL ORDER

[NOTE: Notice is required to be mailed to the ward's guardian ad litem (if any) and attorney; and the interested parties as found in paragraph 9 of the Petition.]

I certify that I have this date mailed (unless otherwise noted) in an envelope with proper postage affixed thereto for first-class delivery a copy of the Final Order Appointing Emergency Guardian and/or Emergency Conservator to the ward and other persons listed below as required by law, and to the following parties at the address listed below:

This _____ day of _____, 20____.

_____
Clerk of the Probate Court

_____

_____
Address

_____
Telephone Number

Probate Court Return Mailing Address:
_____
_____

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

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE:	)	
	)	
_____,	)	**ESTATE NO. _____**
WARD	)	

CERTIFICATE OF CREATION OF EMERGENCY CONSERVATORSHIP
[Pursuant to O.C.G.A. § 29-5-13 (d)]

DATE ORDER ISSUED: _____
GRANTOR *[NAME OF WARD]*:_____
GRANTEE *[NAME OF EMERGENCY CONSERVATOR(S) OF ABOVE WARD]*: _____

An emergency conservatorship has been created for the above-named ward. Said emergency conservatorship expires:

[initial one]

_____ (a) in sixty (60) days, or on the effective date of the appointment of a permanent conservator, or when the emergency conservator(s) is/are removed, or the dismissal of a Petition for the appointment of a conservator, whichever occurs first.

_____ (b) on a date certain, being _____, 20_____.

Original Certificate delivered or mailed to Clerk of Superior Court of _____

County on _____, 20_____.

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

By:_____
Clerk of the Probate Court

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE:	)	
	)	
_____,	)	**ESTATE NO. _____**
WARD	)	

CERTIFICATE OF FILING CERTIFICATE OF CREATION OF CONSERVATORSHIP

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

This _____ day of _____, 20____.

_____
Clerk of the Probate Court

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE:	)	
	)	
_____,	)	**ESTATE NO. _____**
WARD	)	
_____,	)	
DATE OF BIRTH	)	

LETTERS OF EMERGENCY GUARDIANSHIP OF ADULT WARD

FROM: the Judge of the Probate Court of said County

TO: _____, Guardian(s)

The above-named adult ward was found by this Court to be in need of an emergency guardian, and this Court entered an order designating you as such emergency guardian. You have assented to this appointment by taking your oath. In general, your duties as emergency guardian were declared by the Court to be those absolutely necessary to respond to the immediate threatened risk, specifically

These letters expire *[initial one]*:

_____ (a) in sixty (60) days, or on the effective date of the appointment of a permanent guardian, or when the emergency guardian(s) is/are removed, or upon the dismissal of a petition for the appointment of a permanent guardian, whichever occurs first.

_____ (b) on a date certain, being _____, 20_____.

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

_____
Judge of the Probate Court

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

Issued by:

_____ *(Seal)*
Clerk of the Probate Court

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE:	)	
	)	
_____,	)	**ESTATE NO. _____**
WARD	)	
_____,	)	
DATE OF BIRTH	)	

LETTERS OF EMERGENCY CONSERVATORSHIP OF ADULT WARD

FROM: the Judge of the Probate Court of said County.

TO: _____, Conservator(s)

The above-named adult ward was found by this Court to be in need of an emergency conservator, and this Court entered an order designating you as such emergency conservator(s). You have assented to this appointment by taking your oath and posting a bond. In general, your duties as emergency conservator(s) were declared by the Court to be those absolutely necessary to respond to the immediate threatened risk, specifically,

These letters expire *[initial one]*:

_____ (a) in sixty (60) days, or on the effective date of the appointment of a permanent conservator, or when the emergency conservator(s) is/are removed, or upon the dismissal of a petition for the appointment of a permanent conservator, whichever occurs first.

_____ (b) on a date certain, being _____, 20_____.

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

_____
Judge of the Probate Court

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

Issued by:

_____ *(Seal)*
Clerk of the Probate Court

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE:	)	
	)	
_____,	)	**ESTATE NO. _____**
WARD	)	
_____,	)	
DATE OF BIRTH	)	

LETTERS OF EMERGENCY
GUARDIANSHIP AND CONSERVATORSHIP OF ADULT WARD

FROM: the Judge of the Probate Court of said County.

TO: _____, Guardian(s) and Conservator(s)

The above-named adult ward was found by this Court to be in need of an emergency guardian and conservator and has designated you as such emergency guardian(s) and emergency conservator(s). You have assented to this appointment by taking your oath and posting a bond. In general, your duties as emergency guardian(s) and emergency conservator(s) were declared by the Court to be those absolutely necessary to respond to the immediate threatened risk,

.

These letters expire *[initial one]*:

_____ (a) in sixty (60) days, or on the effective date of the appointment of a permanent guardian and conservator, or when the emergency guardian(s) and emergency conservator(s) is/are removed, or upon the dismissal of a petition for the appointment of a permanent guardian and/or conservator, whichever occurs first.

_____ (b) on a date certain, being _____, 20_____.

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

_____
Judge of the Probate Court

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

Issued by:

_____ *(Seal)*
Clerk of the Probate Court

CERTIFICATE OF GUARDIANSHIP / CONSERVATORSHIP ESTABLISHED

Make Electronic Submissions via the Georgia Criminal Justice Information System (CJIS) Network

-OR-

Mail Guardianship / Conservatorship forms to:

Georgia Crime Information Center
Attention: CJIS Operations
Unit 3121 Panthersville Rd.
Decatur, Georgia 30034

*DATE OF ORDER (mm/dd/yyyy)	*JUDGE'S NAME

*PROBATE COURT COUNTY/ORI NUMBER	*ESTATE NUMBER

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

*NAME *(Last, First, Middle)*

*SEX	*RACE	*DATE OF BIRTH (mm/dd/yyyy)	SOCIAL SECURITY NUMBER (###-##-####)

CURRENT ADDRESS *(Street Address)*

CITY	STATE	ZIP CODE

SIGNATURE *(Court Official)*	DATE SIGNED

*Court Official's Title

Mandatory Field

IN THE PROBATE COURT OF _____ COUNTY
STATE OF GEORGIA

IN RE:	)	
	)	
_____,	)	**ESTATE NO. _____**
WARD	)	

CERTIFICATE OF FILING OF CERTIFICATE OF GUARDIANSHIP/CONSERVATORSHIP ESTABLISHED

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

This _____ day of _____, 20____.

_____
Clerk of the Probate Court