

FORMS FOR GUARDIANSHIP OF AN INCAPACITATED INDIVIDUAL

INSTRUCTIONS TO COMPLETE PAPERWORK

It is recommended you arrive at the Court by 4:00 p.m. to process paperwork.

Forms must be filled out completely; typed or clearly printed in ink. All ORIGINAL forms get mailed to the Court; keep copies for your own records.

1. **What You Need to Know Before Filing a Petition** - this explains the duties and other requirements of guardianship of a legally incapacitated individual.

2. **Petition for Appointment of Guardian of an Incapacitated Individual with instructions for completing-** In order to begin the guardianship process you will need to deliver (by mail or in person) the completed petition to the Court along with your payment by check or money order of \$175.00 payable to Kent County Probate Court. If you mail the paperwork, please give the Court 2-3 days to receive and process your petition. You may also include \$12.00 for the certified copy you will receive after the hearing.

3. **Notice of Hearing** - File your paperwork with the Probate Court Office or call 616-632-5440 to obtain a date and time for your Court hearing. Complete the form as much as you are able. Paperwork must be received and processed at least 3-4 weeks prior to the hearing date.

4. **Criminal History Check** – Complete top portion of form.

5. **Central Registry Clearance Request** – Complete top portion of form **and** provide a clear copy of your driver's license.

6. **Order Appointing Guardian Ad Litem** - This document will be given to you when your paperwork has been received and processed. It will provide the name of the person and phone number for you to contact as soon as you receive your hearing date from the Court. You will need to make arrangements with this person to go visit the alleged incapacitated person and they will be required to make a report to the Court by the hearing date.

7. **Proof of Service-** This form tells the Court that you sent copies of the Petition to Appoint Guardian and Notice of Hearing to all interested parties. Interested parties include but may not be limited to the following:

- a. Spouse and children of the ward (if no spouse or children, then the heirs at law).
- b. If known, any person named power of attorney or attorney in fact.
- c. The nominated guardian or current guardian if already appointed.
- d. Any government agency paying benefits in care of the individual for which an application may be pending.

Complete the proof of service by filling in the names and addresses of each person served under the appropriate heading; by regular mail or in person and include the date the service was made. The Court requires that all interested persons be served the required documents no less than **14 days prior to the scheduled hearing if serving by regular mail and no less than 7 days before the scheduled hearing if serving by hand (in person).** Don't forget to sign and date the bottom of the form. This form must be filed with the Court **7 days prior to the hearing.** If the Proof of

Service is not filed 7 days prior to the hearing, your hearing could be adjourned to another date/time.

*******STOP PLEASE READ*******

You must make every effort to obtain addresses for the people you are required to serve, if you do not know an address you must do the following:

- ✓ **Check the phone book**
- ✓ **Complete an internet search, if possible**
- ✓ **Contact the Friend of the Court office for a last known address they may have on file**
- ✓ **Contact any known family members of the person in order to obtain a last known address**

Please make all necessary copies of your petition and notice of hearing (including one for yourself and one for each interested party)

ALL ORIGINAL DOCUMENTS NEED TO BE MAILED OR PERSONALLY DELIVERED TO THE COURT

PREPARE PROPOSED DOCUMENTS FOR HEARING

8. Order Regarding Appointment of Guardian - Enter the name of the alleged incapacitated person. Complete date of birth, race, sex and current address of alleged incapacitated person. Under **“The Court Finds”** indicate the reason why the Order should be granted. It would be the same information you used for obtaining the guardianship on the Petition. Where it indicates **“IT IS ORDERED”** complete 9 and 10. Enter the name of the individual to be appointed guardian, address, telephone number and whether it is a limited or full appointment.

9. Acceptance of Appointment- This is signed by the proposed guardian(s); this lets the Court know that the person accepts the guardianship and its responsibilities.

10. Letters of Guardianship – Enter the name of the alleged incapacitated person. At “TO” enter the name of the proposed guardian with complete address and telephone number. Under number 1, indicate the type of guardianship you are requesting; full or limited) Duties of your role are on the back of the Letters of Guardianship.

COURT STAFF IS PROHIBITED BY LAW FROM GIVING LEGAL ADVICE, IF YOU HAVE ANY LEGAL QUESTIONS DURING THIS PROCESS PLEASE CONTACT AN ATTORNEY OR VISIT THE LEGAL ASSISTANCE CENTER ON THE 5TH FLOOR OF THE KENT COUNTY COURTHOUSE.

Kent County Probate Court
180 Ottawa Avenue, NW
Ste 2500
Grand Rapids, MI 49503

Hours Mon-Fri 8:00-5:00 p.m.
Phone: 616-632-5440
Website: accesskent.com