COURT CODE: 1470
Your Name:
Address:
City, State, Zip:
Telephone:
Email Address:
Self-Represented

IN THE FAMILY DIVISION OF THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA IN AND FOR THE COUNTY OF WASHOE

In the Matter of the Guardianship of the:

□ Person

 \Box Estate

 \Box Person and Estate

of:

CASE NO.:

DEPT:

(name of child alleged to need a guardian) Proposed Protected Minor.

CONSENT / WAIVER OF CHILD (AGE 14 OR OLDER)

I, (child's name) _____, am at least 14 years

old and am the subject of this guardianship.

(initial the sections below that you agree with; you can initial one or both)

Do not mark an "x" – your consent is invalid without your initials next to one or both statements.

____ I consent to (*name of proposed guardian*) ______ and (*second proposed guardian, or "n/a"*) _____ being appointed as my legal guardian(s).

© 2018 Nevada Supreme Court

- _____ I waive personal service of the Petition for Appointment of Guardian(s) and the Citation to Appear and Show Cause regarding the Petition for Appointment of Guardian(s) in this case.
- _____ I acknowledge that I have received a copy of the Petition for Appointment of Guardian(s) and the Citation to Appear and Show Cause regarding the Petition for Appointment of Guardian(s) in this case.

I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.

This document does not contain the personal information of any person as defined by NRS 603A.040.

DATED (*month*) ______ (*day*) _____, 20____.

(Signature)

(Printed Name)