

1 Code: 1780

2 Name: _____

3 Address: _____

4 Telephone: _____

5 Email: _____

6 Self-Represented Litigant

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

10 In the Matter of the Guardianship of

- 11 The Person only
- 12 The Estate only
- 13 The Person and the Estate

14 _____, Case No. _____
15 (Print Name of Protected Person)

16 DOB: _____, Dept. No. 12
17 _____ An Adult.

18 GUARDIAN'S ACKNOWLEDGEMENT OF DUTIES AND RESPONSIBILITIES
19 OF THE PERSON UNDER NRS 159.073 (1)(c)

20 Pursuant to the recommendations of the Nevada Supreme Court, the above-named Adult shall
21 be referred to as the Protected Person throughout this Acknowledgment.

22 I, _____, hereby declare that I
23 (Name of guardian)
24 understand there are certain duties and responsibilities required of me in the administration of the
25 above guardianship. By initialing each item below, I understand my guardianship duties and
26 responsibilities include, but are not limited to the following:

27 **A. Duties and Functions**

28 I hereby acknowledge and understand that the duties and functions of a Guardian are as follows:

_____ To always act in the best interest of the Protected Person.

_____ To supply the Protected Person with proper care, including food, shelter, clothing, and

1 all incidental necessities; and appropriate residence; support; and education, including
2 training for a profession if applicable.

3 _____ To provide the Protected Person with medical, surgical, dental, psychiatric,
4 psychological, hygienic, or other care and treatment as needed.

5 _____ To notify all interested parties, the Court, the trustee, and named executor or appointed
6 personal representative of the estate of the Protected Person within 30 days after the
7 death of the Protected Person.

8 **B. Court Authority**

9
10 1. I hereby acknowledge and understand that in accordance with NRS 159.079, court authority
11 must be obtained prior to:

12 _____ Moving or placing the Protected Person in a residence outside of the State of
13 Nevada.

14 _____ Moving or placing the Protected Person in a secured residential long-term care
15 facility unless the Court specifically granted the authority when the guardian was
16 appointed or the placement is pursuant to a written recommendation by a licensed
17 physician, a licensed social worker, or employee of a county or state office for
18 protective services.

19
20 2. I hereby acknowledge and understand that in accordance with NRS 159.0805, court
21 authority must be obtained prior to:

22 _____ Engaging the Protected Person in experimental medical, biomedical, or behavioral
23 treatment.

24 _____ Engaging the Protected Person in any medical practice to sterilize them.

25 **C. Notices and Reports**

26
27 I hereby acknowledge and understand that that in addition to the performance of the duties
28 outlined above, the following will be required of me:

1 _____ Within 5 days of being appointed as guardian, a copy of the Order Appointing Guardian
2 must be served to the Protected Person.

3 _____ Within 10 days after the Court has filed the Order Appointing Guardian, a Notice of
4 Entry of Order Appointing Guardian must be filed and mailed to all individuals entitled
5 to notice.

6 _____ Annually, within 60 days of the anniversary of the appointment of guardianship, an
7 Annual Report of Guardian must be filed to update the Court on the health and well-
8 being of the Protected Person.

9 _____ Within 10 days of moving the Protected Person to a secured residential long-term care
10 facility, an Annual Report of Guardian must be filed.

11 _____ At any time the Court orders, an Annual Report of Guardian must be filed.

12 _____ Within 30 days of filing an Annual Report of Guardian, a copy of the report must be
13 given to the guardian of the estate, if any have been appointed.
14

15 **D. Miscellaneous**

16 I hereby acknowledge and understand the following:
17

18 _____ It is my responsibility to accurately keep all records and file all reports with the Court
19 regarding the well-being of the Protected Person.

20 _____ It is my responsibility to maintain all records and documents for the guardianship of the
21 Protected Person for 7 years after the Court terminates the guardianship.

22 _____ It is my responsibility to inform the Court if I am no longer qualified to serve as a
23 guardian, and the Court will determine whether or not I can continue the guardianship.
24

25 The following can disqualify me from keeping my guardianship per NRS 159.1852:

- 26 1. If I am convicted of a gross misdemeanor or felony in any state.
- 27 2. If I file or receive protection as an individual or as a principle of any entity under
28 the federal bankruptcy laws.

1 3. If I have my driver's license suspended, revoked, or cancelled for nonpayment of
2 child support.

3 4. If I am suspended for misconduct or disbarred from the practice of law, the
4 practice of accounting, or any other profession which involves or may involve
5 the management or sale of money, investments, securities or real property, or
6 requires licensure in any state.

7 5. If I have a judgement entered against me for misappropriated funds or assets
8 from any person or entity in any state.

9
10 _____ I should seek the advice and assistance of an attorney if I need legal advice, or if I do not
11 fully understand my duties and responsibilities, to ensure that I remain in full
12 compliance with the laws of the State of Nevada.

13
14 _____ I have read and reviewed the Guardian's Acknowledgment of Duties and
15 Responsibilities and I understand the terms and conditions under which the Guardianship
16 is to be managed.

17 _____ I agree to comply with the rules and duties of a guardian as set forth in the laws of the
18 State of Nevada.

19 _____ I fully understand that failure to comply with the Guardianship statutes, or with any
20 Order made by the Court, may result in my removal as Guardian and that I may be
21 subject to such penalties as the Court may impose.

22
23 I declare under penalty of perjury that I have read and understand my duties and responsibilities
24 as outlined in the foregoing Guardian's Acknowledgement of Duties and Responsibilities Under
25 NRS 159.073(1)(c). This document does not contain the social security number of any person.

26 Date _____

27 _____
Signature

28 _____
Print Name