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Code:  
(Your name) \_\_\_\_\_  
(Your address) \_\_\_\_\_  
\_\_\_\_\_  
(Telephone) \_\_\_\_\_

In Proper Person

IN THE \_\_\_\_\_ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA  
IN AND FOR THE COUNTY OF \_\_\_\_\_

In the Matter of the Guardianship of )  
 the person, ) CASE NO. \_\_\_\_\_  
 the estate, )  
 the person and estate. ) DEPT. NO: \_\_\_\_\_  
\_\_\_\_\_)  
An Adult. )  
\_\_\_\_\_)

**ADDENDUM TO PETITION FOR GUARDIANSHIP OF AN ADULT**  
**REQUESTING IMMEDIATE TEMPORARY GUARDIANSHIP**

\_\_\_\_\_ and \_\_\_\_\_  
(Name of Petitioner) (Name of Co-Petitioner)

Petitioner(s) in this matter, state(s) as follows:

1. A Verified Petition For Guardianship was filed in this matter on (Date Petition was filed) \_\_\_\_\_ by the above-named Petitioner(s) to be appointed guardian(s) of (Name of Ward) \_\_\_\_\_

2. This Request For Immediate Temporary Guardianship is made for the following reasons:

***One of the following questions, A or B, must be answered with a "yes" in order for an immediate guardianship to be considered. Both A and B may apply. If so, answer "yes" on both A and B lines. Carefully, and in detail, explain your answers to the statements.***

A. \_\_\_\_\_ The Ward faces a substantial risk of immediate physical harm or needs immediate medical attention and the Ward lacks the capacity to respond to the risk of harm or to

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obtain the necessary medical attention because:

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*(If you need more space, you may attach additional pages. Be sure the pages clearly indicate they are a continuation of this portion of the document.)*

B. \_\_\_\_\_ The Ward is unable to respond to a substantial and immediate risk of financial loss and the Ward lacks the capacity to respond to the risk of loss because:

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***(If you need more space, you may attach additional pages. Be sure the pages clearly indicate they are a continuation of this portion of the document.)***

3. I have filed a certificate signed by a physician licensed to practice in this state which states that the proposed Ward is unable to respond to a substantial and immediate risk of physical harm, or, the Ward is in need of immediate medical attention, or, the Ward faces a substantial risk of financial loss, and the Ward lacks capacity to respond to those risks, or, I have filed an Affidavit explaining why the certificate is not available at this time.

4. I (have or have not) \_\_\_\_\_ tried in good faith to notify the following people of this Request For Immediate Guardianship:

***Carefully read the following statements and print "yes" or "no" to each statement.***

\_\_\_\_\_  
(yes or no) Husband or Wife of the Ward on \_\_\_\_\_  
(date contact was made)  
 In person     By telephone     In writing

\_\_\_\_\_  
(yes or no) Children of the Ward on \_\_\_\_\_  
(date contact was made)  
 In person     By telephone     In writing

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\_\_\_\_ Parents of the Ward on \_\_\_\_\_  
(yes or no) (date contact was made)  
 In person  By telephone  In writing

\_\_\_\_ Current Legal Guardian of the Ward on \_\_\_\_\_  
(yes or no) (date contact was made)  
 In person  By telephone  In writing

\_\_\_\_ Brothers and/or Sisters of the Ward who are over the age of 14 years on  
(yes or no)  
\_\_\_\_\_  
(date contact was made)  
 In person  By telephone  In writing

\_\_\_\_ Current Legal Guardians of any brothers and sisters of the Ward who are under the  
(yes or no) age of 14 years on \_\_\_\_\_  
(date contact was made)  
 In person  By telephone  In writing

\_\_\_\_ The current person or officer of a care provider having the care, custody or control  
(yes or no) of the Ward on \_\_\_\_\_  
(date contact was made)  
 In person  By telephone  In writing

\_\_\_\_ The Ward has no spouse and there are no known relatives, therefore, I contacted the  
(yes or no) Public Guardian on \_\_\_\_\_  
(date contact was made)  
 In person  By telephone  In writing

***If you answered "no" to any of the questions above, explain why those people have not been contacted prior to the filing of this Request For Immediate Temporary Guardianship.***

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*(If you need more space, you may attach additional pages. Be sure the pages clearly indicate they are a continuation of this portion of the pleading.)*

Dated \_\_\_\_\_

Dated \_\_\_\_\_

\_\_\_\_\_  
(Signature of Petitioner)

\_\_\_\_\_  
(Signature of Co-Petitioner)

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**VERIFICATION OF PETITIONER**

STATE OF NEVADA )  
 )  
COUNTY OF \_\_\_\_\_ )

I, (your name) \_\_\_\_\_, being first duly sworn under penalty of perjury, hereby depose and say:

That I am the Petitioner in the within action; that I have read the foregoing Addendum to the Petition For Guardianship Requesting Immediate Temporary Guardianship and know the contents thereof; that the same is true of my knowledge except as to those matters therein stated upon information and belief and as to those matters, I believe them to be true.

\_\_\_\_\_  
Petitioner

SIGNED and SWORN to before me by (Petitioner's name) \_\_\_\_\_  
on the \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

**ACKNOWLEDGMENT OF PETITIONER**

STATE OF NEVADA )  
 )  
COUNTY OF \_\_\_\_\_ )

On this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me, the undersigned Notary Public in and for the said County and State, personally appeared (your name) \_\_\_\_\_  
\_\_\_\_\_ known to me to be the person described in and who executed the foregoing instrument, and who acknowledged to me that he/she did so freely and voluntarily and for the purposes and uses and purposes therein mentioned.

WITNESS my hand and official seal.

\_\_\_\_\_  
NOTARY PUBLIC

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**VERIFICATION OF CO-PETITIONER**

STATE OF NEVADA )  
 )  
COUNTY OF \_\_\_\_\_ )

I, (name of co-petitioner) \_\_\_\_\_, being first duly sworn under penalty of perjury, hereby depose and say:

That I am the Co-Petitioner in the within action; that I have read the foregoing Addendum to the Petition For Guardianship Requesting Immediate Temporary Guardianship and know the contents thereof; that the same is true of my knowledge except as to those matters therein stated upon information and belief and as to those matters, I believe them to be true.

\_\_\_\_\_  
Co-Petitioner

SIGNED and SWORN to before me by (Co-Petitioner's name)

\_\_\_\_\_

on the \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

**ACKNOWLEDGMENT OF CO-PETITIONER**

STATE OF NEVADA )  
 )  
COUNTY OF \_\_\_\_\_ )

On this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me, the undersigned Notary Public in and for the said County and State, personally appeared (co-petitioner's name) \_\_\_\_\_ known to me to be the person described in and who executed the foregoing instrument, and who acknowledged to me that he/she did so freely and voluntarily and for the purposes and uses and purposes therein mentioned.

WITNESS my hand and official seal.

\_\_\_\_\_  
NOTARY PUBLIC