

**STATE OF MICHIGAN
PROBATE COURT
COUNTY OF KENT**

**ORDER APPOINTING GUARDIAN FOR
INDIVIDUAL WITH A
DEVELOPMENTAL DISABILITY**

FILE NO.

In the matter of _____, an individual with a developmental disability

1. Date of hearing: _____ Judge: _____ Bar no.

2. Findings of fact are more fully stated on the record regarding the individual's nature and extent of general intellectual functioning, extent of impairment of adaptive behavior, capacity to manage his/her estate and financial affairs, and capacity to care for self by making and communicating responsible decisions concerning his or her person.

THE COURT FINDS:

3. Notice of hearing was given to or waived by all interested parties.

4. a. The individual was present at the hearing.
 b. The individual was not present at the hearing. His/her presence was excused upon showing by testimony and affidavit of a
 psychologist, physical
 physician, that the individual's attendance would subject him/her to serious emotional harm.

5. Testimony was given by the person who prepared the report or person who performed an evaluation serving, in part, as the basis for the report.

6. Upon the presentation of clear and convincing evidence and with without the verdict of a jury, the individual is an individual with a developmental disability and requires guardianship services.

7. The above named individual is totally partially without capacity to care for his/her person estate as to the following necessary tasks, responsibilities, or judgments but is otherwise legally competent and has the capacity to perform in other areas.

8. The most appropriate and the least restrictive living arrangement suited to the individual's condition is _____.

The individual presently resides in the following facility: _____

9. A reasonable effort was made to question the individual and he/she indicated
 no preference as to who should be appointed guardian.

that he/she preferred _____ to serve as guardian
Name (type or print)

and _____ as standby guardian.
Name (type or print)

(PLEASE SEE OTHER SIDE)

Do not write below this line - For court use only

10. There is no qualified, suitable individual or agency willing to act as guardian and the appointment of an agency directly providing services to the individual is necessary at present.
11. A reasonable effort was made to orally inform the individual of his/her right to request the guardianship to be dismissed or modified at any time. A written notice of these rights was also served on him/her.
12. Other: _____

IT IS ORDERED:

13. The petition is granted. denied on the merits. dismissed/withdrawn.

14. _____, whose address and telephone number are
 Name (type or print)

 Address City State Zip Telephone no.

is appointed

- a. plenary guardian of the individual
 and shall qualify by filing estate until further order of the court
 an acceptance of appointment.
 a bond in the amount of \$ _____.

The plenary guardian has the authority to execute the necessary application for administrative admission to a suitable facility or AFC home.

- b. partial guardian of the individual
 estate for the term of _____ years
 an acceptance of appointment.
 and shall qualify by filing a bond in the amount of \$ _____, and shall have only the following powers:

Authority to determine the living arrangements of the ward, including the authority to execute the necessary application for administrative admission to a suitable facility or AFC home. Authority to consent to medical and surgical care for the ward, except sterilization, vasectomy, abortion, organ transplants from the ward to another person and experimental treatment without prior Court order. The guardian shall submit to the court a report as required at least once each year and thereafter annually on the condition of said ward.

The individual retains all legal and civil rights except those which have been specifically granted to the partial guardian. After qualification, the guardian shall comply with all relevant requirements under the law.

15. The guardian is authorized to execute an application to admit the individual named above to

 Name of facility

16. _____, is appointed standby guardian.

 Name (type or print)

 Address City State Zip Telephone no.

In case of death, incapacity, or resignation of the initially-appointed guardian or an emergency situation during the absence and unavailability of the initially-appointed guardian, the standby guardian shall file

- an acceptance of appointment
 bond in the amount of \$ _____

and shall assume the powers and duties of the initially-appointed guardian.

17. **The guardian may not change the domicile or residence of the ward from the State of Michigan without prior order of this court.**

 Date Judge Bar no

 Attorney name (type or print) Bar no.

 Address City State Zip Telephone no.