

STATE OF MICHIGAN PROBATE COURT OAKLAND COUNTY CIRCUIT COURT – FAMILY DIVISION	ORDER APPOINTING GUARDIAN FOR INDIVIDUAL WITH A DEVELOPMENTAL DISABILITY	FILE NO.
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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 ☐ person ☐ partially without capacity to care for his/her ☐ estate as to the following necessary tasks, responsibilities, or judgments but is otherwise legally competent and has the capacity to perform in other areas.

☐ Placement	☐ Medical Decisions	☐ Psychiatric
☐ Financial	☐ Legal/Contractual	☐ Consent to photograph and fingerprint
☐ Release of Information	☐ Consent to Programs	☐ Vocational/Educational
☐ All of the above		

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

☐ The individual presently resides in a 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 ☐ estate until further order of the court with authority to perform all acts permitted or required by statute and court rules, including the power to view medical and mental health records,

and shall qualify by filing ☐ an acceptance of appointment.
☐ a bond in the amount of \$ _____.

☐ b. partial guardian of the ☐ individual ☐ estate for the term of _____ years

and shall qualify by filing ☐ an acceptance of appointment.
☐ a bond in the amount of \$ _____, and shall have only the following powers:

☐ Placement	☐ Medical Decisions	☐ Psychiatric
☐ Financial	☐ Legal/Contractual	☐ Consent to photograph and fingerprint
☐ Release of Information	☐ Consent to Programs	☐ Vocational/Educational
☐ View medical and mental health records		
☐ All of these powers		

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.

☐ c. ☐ Co-Guardians may act independently

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

Name of facility

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

Address _____ City _____ State _____ Zip _____ Telephone no. _____

Is appointed standby guardian. 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 consent to a do-not-resuscitate order, experimental treatment, sterilization, abortion or organ donations without court order. The guardian is prohibited from changing the individual's residence from the State of Michigan without prior approval of the court.

Date

Judge

Attorney name (type or print)

Bar no.

Address _____ City _____ State _____ Zip _____ Telephone no. _____