

1 Code:
(Your name) _____

2
3 (Address) _____

4 _____
5 (Telephone) _____

6 In Proper Person

7 IN THE _____ JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA

8 IN AND FOR THE COUNTY OF _____

9
10 In the Matter of the Guardianship of)

the person)

CASE NO. _____

the estate)

the person and the estate,)

DEPT NO. _____

11 of:)

12)

13 _____)

14)

a Minor.)

15 _____)

16 STATE OF NEVADA)

17)

18 COUNTY OF _____)

19 **REPORT OF THE GUARDIAN OF THE MINOR PERSON**

20 _____ through _____

21 **BEGINNING DATE**

ENDING DATE

22 I, (name of guardian) _____ am the Guardian of the Person of

23 (name of ward) _____, who was born on (date of birth)

24 _____ and is _____ years old. My annual report is as follows:

25
26 **I.**

27 **Development of the Ward**

1 The ward's goals, accomplishments or activities which have occurred over the past year are:

2 _____
3 _____
4 _____
5 _____
6 _____

7 **II.**

8 **Health of the Ward**

9 (A) The ward's current physical health is Good/ Fair/ Poor. (Please describe)

10 _____
11 _____
12 _____
13 _____

14 (B) The ward has/ has not had any significant health problems in the last year.

15 (If yes, please describe) _____

16 _____
17 _____
18 _____

19 (C) The ward has/ has not had any significant injuries or accidents in the last year.

20 (If yes, please describe) _____

21 _____
22 _____
23 _____

24 (D) If the ward has had any significant health problems, injuries or accidents in the last
25 year, I have filed any medical documentation and/or doctors' notes under a Confidential
26 Medical/Educational Information Sheet.

1 (E) The ward has/ has not received the required immunizations. If the ward has
2 received immunizations, I have filed a copy of the ward's immunization record under a
3 Confidential Medical/Educational Information Sheet.
4

5 **III.**

6 **Education of the Ward**

7 (A) The ward attended (name of school) _____ last year.
8 I have filed a copy of his/her most recent report card under a Confidential Medical/Educational
9 Information Sheet.

10 (B) The ward will attend (name of school) _____ next year.

11 (C) The ward had the following accomplishments and/or problems in school last year:
12 (Please describe or write "N/A") _____
13 _____
14 _____
15 _____

16 **IV.**

17 **Well Being of the Ward**

18 (A) The ward has/ has not had any emotional difficulties in the last year. (If yes,
19 please describe) _____
20 _____
21 _____
22 _____
23 _____

24 **(B) (Check One)**

25 The ward lives with me.

26 **(Or)**

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The ward does not live with me because (explain why the ward does not live with you and give the address where the ward lives). _____

(C) The ward is primarily supervised by (name and relationship to ward) _____

SIGNED and SWORN to before me by (name of guardian) _____

on the ____ day of _____, ____.

NOTARY PUBLIC

OR

DEPUTY CLERK

OR

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Executed on (date) _____ (signature) _____