

	No.	
IN THE GUARDIANSHIP OF	§	IN THE PROBATE COURT
_____	§	
	§	NUMBER TWO
	§	
AN ALLEGED INCAPACITATED	§	
PERSON	§	TARRANT COUNTY, TEXAS

**APPLICATION FOR APPOINTMENT OF  
PERMANENT GUARDIAN OF THE PERSON**

**TO THE HONORABLE JUDGE OF SAID COURT:**

NOW COMES, \_\_\_\_\_, Applicant, and files this Application for Appointment of a Permanent Guardian of the Person of \_\_\_\_\_ (“Proposed Ward”) pursuant to Section 1101.001 of the Texas Estates Code, and would respectfully show the Court the following:

**PROPOSED INCAPACITATED PERSON**

Proposed Ward is an adult (male/female) who was born on (date of birth) and is \_\_\_ years old. Proposed Ward currently resides at (Proposed Ward’s address) where (he/she) can be served. Proposed Ward’s telephone number is \_\_\_\_\_. Proposed Ward is in the care and custody of \_\_\_\_\_. Proposed Ward is an incapacitated person as defined in Section 1002.017(2) of the Texas Estates Code.

**VENUE**

This Court has venue over these proceedings because the Proposed Ward resides in Tarrant County, Texas, or was located in Tarrant County, Texas on the date this application was filed or the principal estate of the Proposed Ward is located in Tarrant County, Texas.

**ALTERNATIVES TO GUARDIANSHIP**

As of the date of filing, alternatives to guardianship and available supports and services to avoid guardianship were considered by applicant. After due consideration of all alternatives to guardianship and available supports and services it was determined none are feasible or would avoid the need for a guardianship.

**CITATION AND NOTICE**

The name, addresses and relationships of those persons required to be served by personal citation pursuant to Section 1051.103 of the Texas Estates Code, to the best of the applicant’s knowledge, are as follows:

Name:  
Address:  
Telephone:  
Relationship: Proposed Ward

Name:  
Address:  
Telephone:  
Relationship: Parents

Name:  
Address:  
Telephone:  
Relationship: Spouse

Name:  
Address:  
Telephone:  
Relationship: Proposed Guardian

The name, addresses and relationships of those persons required to be notice of this proceeding pursuant to Section 1051.104 of the Texas Estates Code, to the best of the applicant's knowledge, are as follows:

Name:  
Address:  
Telephone:  
Relationship: Adult Child of Proposed Ward

Name:  
Address:  
Telephone:  
Relationship: Adult Sibling of Proposed Ward

Name:  
Address:  
Telephone:  
Relationship: Administrator/Operator of Residential Facility

Name:  
Address:  
Telephone:  
Relationship: Person Holding POA

The name, addresses and relationships of those persons required to be listed in the application but not required to be served pursuant to Section 1101.001(b)(13)(D) of the Texas Estates Code, to the best of the applicant's knowledge, are as follows:

Name:  
Address:  
Telephone:  
Relationship:       Minor Child of Proposed Ward

The name, addresses and relationships of those persons required to be listed in the application but not required to be served pursuant to Section 1101.001(b)(13)(C) of the Texas Estates Code, to the best of the applicant's knowledge, are as follows:

Name:  
Address:  
Telephone:  
Relationship:       Minor Siblings of Proposed Ward

ESTATE

To the best of applicant's knowledge and belief the estate of the Proposed Ward is *de minimus*. The Proposed Ward currently receives \$ \_\_\_\_\_ in (source of monthly income).

OTHER GUARDIANSHIPS/POA

To the best of applicant's knowledge and belief there are no guardianships existing or pending of any kind for the Proposed Ward in the state of Texas or any other state and the Proposed Ward has not executed a power of attorney.

PROPOSED GUARDIAN

This application is for the appointment of an eligible and suitable person who is best qualified to serve as Guardian of the Person for (state name of Proposed Ward) possibly, \_\_\_\_\_ who (is/isnot) related to the Proposed Ward and who is not disqualified by law to serve as guardian of the person.

DURATION OF GUARDIANSHIP

Applicant requests that the guardianship be granted for an indefinite term. The term of this guardianship shall be until the Ward is restored to full capacity, dies, or until the Court determines this matter shall be terminated.

NATURE OF INCAPACITY

According to a (CME or DMR) signed by \_\_\_\_\_ a (physician/psychologist) licensed to practice in the state of Texas, on (date CME/DMR signed) the nature of the Proposed Ward's incapacity is that (he/she) suffers with (state diagnosis) and is (totally/partially) incapacitated. The Proposed Ward is unable to personally initiate, handle or make decisions concerning (his/her) food, clothing or shelter, or physical health or to manage (his/her) financial affairs due to (his/her) condition. The Proposed Ward does not have capacity to vote in a public election, be eligible to hold or obtain a license to operate a motor vehicle or make personal decisions regarding residence. Therefore, applicant requests the appointment of a guardian and the granting of the requested powers listed below.

#### SPECIFIC AREAS OF PROTECTION AND ASSISTANCE REQUESTED

Applicant requests that the proposed guardian have full authority over the person of (name of Proposed Ward) including, but not limited to, the following rights and powers (name of Proposed Ward) is referred to as the "Ward" for the purposes of these powers):

1. The power to review, to take possession of and to consent to the disclosure of the Ward's medical, dental and healthcare records.
2. The power to apply for, arrange for, and consent to any and all psychological, psychiatric, medical or healthcare examinations, tests, treatments or evaluations for the Ward, but not the power to consent to in-patient psychiatric commitment of the Ward.
3. The power to consent to or object to medical, dental and healthcare treatment for the Ward, including, but not limited to surgery, but not the power or authority to consent to a sterilization or abortion for the Ward.
4. The power to make decisions regarding the Ward's residence, including, the power to make application for, to consent to, and to enroll the Ward in private and public residential care facilities, including twenty-four (24) hour care facilities or nursing home facilities.
5. The power to apply for and to secure an identification card, social security card or other identification documents for the Ward.
6. The power to apply for, consent to, and to enroll the Ward in appropriate educational, vocational and recreational services.
7. The power to apply for and to receive funds from governmental sources for the Ward, including, but not limited to, Social Security, Social Security Disability, Medicare, Supplemental Security Income benefits, Medicaid, HUD Section 8 rent subsidies and Veteran's benefits.
8. The power to apply for and to consent to governmental services on the Ward's behalf, including, but not limited to, food stamps, Medicaid and vocational rehabilitation programs.
9. The power to consent to the administration of psychoactive medications for the benefit of the Ward.
10. The power to sign a DO NOT RESUSCITATE ORDER on behalf of the Ward.
11. The power to transport the Ward to an inpatient mental health facility and file for emergency detention.

LIMITATION OF RIGHTS TO BE INCLUDED IN COURT'S ORDER

Applicant requests that the Proposed Ward's rights be limited as follows:

1. (name of Proposed Ward) shall no longer have the right to operate a motor vehicle or hold or obtain a license to operate a motor vehicle under Chapter 521 of the Transportation Code.
2. (name of Proposed Ward) shall no longer have the right to vote in a public or private election.
3. (name of Proposed Ward) shall no longer have the right to make decisions involving (his/her) marital status.
4. (name of Proposed Ward) shall no longer have the right to make decisions or give consent concerning (his/her) medical, dental and healthcare treatment, tests, examinations or evaluations.
5. (name of Proposed Ward) shall no longer have the right to make gifts or real or personal property.
6. (name of Proposed Ward) shall no longer have the right to execute a power of attorney.
7. (name of Proposed Ward) shall no longer have the right to purchase, use, own or possess firearms.
8. (name of Proposed Ward) shall no longer have the right to enter into contracts.
9. (name of Proposed Ward) shall no longer have the right to make decisions regarding (his/her) residence.
10. (name of Proposed Ward) shall no longer have the right to personally seek employment, obtain government assistance or access government benefits or funds.
11. (name of Proposed Ward) shall no longer have the right to exercise the powers and authority over (his/her) person that are given to the guardian.

PRAYER

WHEREFORE, Applicant requests that notice and citation of this Application be given as required by law; that a hearing on this Application be set; that an eligible and suitable person, who is best qualified to serve, be appointed Guardian of the Person of \_\_\_\_\_ an adult; that the Court Order appointing the guardian be effective upon the appointed guardian taking the oath and giving a bond as required by law; that upon the guardian's qualification, the Clerk of this Court shall issue Letters of Guardianship to the appointed guardian; that the Court appoint an attorney ad litem to represent \_\_\_\_\_ and that the Court enter any other orders it deems necessary and just.

Respectfully submitted,

\_\_\_\_\_  
Attorney  
Address  
SBN:

Telephone  
Fax

STATE OF TEXAS       §  
                                  §  
COUNTY OF TARRANT §

BEFORE ME, the undersigned authority, on this day personally appeared \_\_\_\_\_, applicant in the foregoing Application for Appointment of Permanent Guardian of the Person and known to me to be the person whose name is subscribed to the above and foregoing application and stated under oath that such application contains a correct and complete statement of the facts and matters to which it relates and all the contents thereof are true, complete and correct to the best of applicant's knowledge.

SWORN AND SUBSCRIBED TO BEFORE ME on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Notary Public, State of Texas