

**WORKSHEET FOR APPOINTMENT OF
GUARDIAN/CONSERVATOR
OF A MINOR/ MINOR COMPROMISE**

1. Information needed from Petitioner:

- A. Name of Petitioner: _____
- B. Address of Petitioner: _____
- C. Telephone Number of Petitioner: _____
- D. Social Security Number of Petitioner: _____
- E. Relationship of Petitioner to incapacitated person: _____
- F. Name of minor: _____
- G. Address/Residence of or minor: _____
- H. Telephone Number of minor: _____
- I. Social Security Number of minor: _____
- J. Date of birth/age of minor person: _____ years
- K. Name and address of parents of minor:
Mother: _____
Father: _____

12. Caption of Lawsuit (or provide copy of caption) _____

13. Date of injury/occurrence giving rise to lawsuit: _____

14. Amount of settlement and names of party (ies) to pay:

15. Name of Insurance Company paying claim: _____

16. Amount of medical bills/other expenses paid prior to the date of the Petition for Minor's Compromise: \$ _____ Amount of any outstanding / additional medical expenses that may be incurred: \$ _____, but not to

exceed: \$ _____.

The following information may be needed by the Court Visitor in preparing the report for Court. Please complete the following information with regard to the person who is proposed to act as Guardian and Conservator in this matter:

1. Please state whether the proposed Conservator is employed

If so, please state the current place of
employment: _____

2. Please describe any past experience of the proposed Guardian in taking care of an incapacitated person, or making arrangements for the proposed ward's medical care, clothing, housing arrangements

3. Please describe any past experience of the proposed Conservator in taking care of the ward's finances, paying bills, making deposits, etc. If you have been assisting the ward in doing these activities, please indicate for how long you have been doing it.

4. Please state whether you, if you are seeking appointment as Guardian and/or Conservator, have been charged with and/or convicted with any crime, whether it a misdemeanor or felony, and indicate the nature of the charges and the disposition of the charges.

5. Please state whether you know of any other person who may contest this proceeding and his or relationship to the ward.

