ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):			FOR COURT USE ONLY
TELEPHONE NO.:	FAX NO. (C	ptional):	
E-MAIL ADDRESS (Optional):			
ATTORNEY FOR (Name):	CALIFORNIA COUNTY OF		
	CALIFORNIA, COUNTY OF		
STREET ADDRESS: MAILING ADDRESS:			
CITY AND ZIP CODE:			
BRANCH NAME:			
	-	TATE OF (4)	
GUARDIANSHIP OF TH	E PERSON ES	TATE OF (Name):	
CONSENT OF	PROPOSED GUARDIAN		CASE NUMBER:
NOMINATION OF GUARDIAN			
CONSENT TO	APPOINTMENT OF GUARDIAN AN	D WAIVER OF NOTICE	
CONSENT OF PROPOSED GUARDIAN			
1. I consent to serve as guardian of the person estate of the minor.			
Date:			
	(TYPE OR PRINT NAME)	(SIC	SNATURE OF PROPOSED GUARDIAN)
	NOMINA	ATION OF GUARDIAN	
2. I am a pare	ent of the minor a donor of	of a gift to the minor. I nominate	(name and address):
as guardian of the	person estate	of the minor.	
3. I am a parent of the minor a donor of a gift to the minor. I nominate (name and address):			
as guardian of the	person estate	of the minor.	
Date:		L	
		<u> </u>	
	(TYPE OR PRINT NAME)		(SIGNATURE)
an adult o Parents o	or is adopted, the court change	s guardians, or the court te it petition the court to term	inate the guardianship. The court
	CONSENT TO APPOINTMENT	T OF GUARDIAN AND WAIN	ER OF NOTICE
4. I consent to appointment of the guardian as requested in the Petition for Appointment of Guardian of Minor, filed on			
(date): . I am entitled to notice in this proceeding, but I waive notice of hearing of the petition, including			
, ,	st for independent powers contained	•	· · · · · · · · · · · · · · · · · · ·
3. 4, 10440	and the second s		
		•	
DATE	(TYPE OR PRINT NAME)	(SIGNATURE	E) RELATIONSHIP TO MINOR
		•	
DATE	(TYPE OR PRINT NAME)	(SIGNATURE	RELATIONSHIP TO MINOR
DATE	(TYPE OR PRINT NAME)	(SIGNATURE	RELATIONSHIP TO MINOR
Continued on	, , , , , , , , , , , , , , , , , , ,	(3.3.41101)	,