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| ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NUMBER: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name): | FOR COURT USE ONLY |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME: | |
| CASE NAME: | |
| LETTERS OF GUARDIANSHIP (JUVENILE) | CASE NUMBER: |

LETTERS

1. (Name): _____ is appointed guardian of the PERSON
 of (child's name): _____ (date of birth): _____
 with powers to make decisions about, and duties to provide for, the child's care, custody, control, education, residence, and medical treatment as set forth in sections 2351(a), 2352, and 2353 of the Probate Code, subject to any limits or conditions in 2.
2. Other powers granted or conditions imposed (specify):

continued on Attachment 2.

AFFIRMATION

3. **I solemnly affirm** (promise) that I will perform the duties of a guardian of the person as required by law. I have received and had a chance to read a copy of *Becoming a Child's Guardian in Juvenile Court* (form JV-350-INFO).

Signed on (date): _____ at (place): _____, California.

(TYPE OR PRINT NAME)



(SIGNATURE OF APPOINTED GUARDIAN)

ISSUED, clerk of the court, with seal of the court affixed:

(SEAL)

Date: _____

Clerk, by _____, Deputy

NOTICE

The juvenile court named above has jurisdiction over this guardianship. Any request to change or end the guardianship, including a request to move the child's residence out of California, to change a visitation order, or to appoint a successor guardian, must be filed in the juvenile court using *Request to Change Court Order* (form JV-180).

(Continued on the next page)

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| CHILD'S NAME: | CASE NUMBER: |
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**IMPORTANT NOTICE
TO GUARDIAN OF CHILD**

This form, called *Letters of Guardianship*, is evidence of your appointment as guardian of the child. The *Letters of Guardianship* stay in effect until the guardianship ends or new *Letters of Guardianship* are issued. A guardianship ends when the child reaches 18 years of age unless any of the following events happens before then: the child dies; the child is adopted; the child is emancipated by getting married, entering active military duty, or receiving a declaration of emancipation; or the court orders the guardianship to end.

To verify your appointment and authority to school personnel, medical personnel, and other service providers, you will need to show them a certified copy of this form. Be sure to keep this form in a safe place. If you misplace this form, you will need to request a new certified copy from the clerk of the juvenile court. You may be charged a fee for the certified copy.

CERTIFICATION

I certify that this is a correct copy of the original form on file in my office and that the *Letters of Guardianship* issued to the person named on page one have not been modified, revoked, annulled, or set aside, and are still in full force and effect.

(SEAL)

Date:

Clerk, by _____, Deputy