

<b>STATE OF MICHIGAN PROBATE COURT COUNTY</b>  <b>CIRCUIT COURT - FAMILY DIVISION</b>	<b>ORDER REGARDING APPOINTMENT OF GUARDIAN OF INCAPACITATED INDIVIDUAL</b>	<b>FILE NO.</b>
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In the matter of \_\_\_\_\_

Court ORI	Date of birth	Race	Sex	Current address of incapacitated individual
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1. Date of hearing: \_\_\_\_\_ Judge: \_\_\_\_\_ Bar no. \_\_\_\_\_

**THE COURT FINDS:**

2. Notice of hearing was given to or waived by all interested persons.

3. The individual is not in need of a guardian.

4. Upon the presentation of clear and convincing evidence, the individual named above, by reason of  
 mental illness       mental deficiency       chronic use of drugs  
 chronic intoxication       physical illness or disability       other: \_\_\_\_\_

is impaired to the extent of lacking sufficient understanding or capacity to make or communicate informed decisions, and is an incapacitated individual.

5. Upon the presentation of clear and convincing evidence, appointment of a guardian is necessary as a means of providing continuing care and supervision of the individual.

6. The individual is  partially  totally without the capacity to care for himself/herself.

7. There is no competent, suitable person willing to act as guardian, and the appointment of a professional guardian is in the best interests of the adult. A bond must be filed.

**IT IS ORDERED:**

8. The petition for appointment of guardian is  granted.  denied on the merits.  dismissed/withdrawn.

9. \_\_\_\_\_, whose address and telephone number are:

Address	City	State	Zip	Telephone no.
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is appointed  limited  full guardian of the adult and shall qualify by filing an acceptance of appointment.

Bond at \$ \_\_\_\_\_ must be filed. After qualification, the guardian shall comply with all relevant requirements under the law.

10. The limited guardian shall have only the following powers:

11. If a guardian is appointed, the Michigan Department of State Police shall immediately enter the legally incapacitated individual's identifying information in this court order on the law enforcement information network.

12. **IT IS FURTHER ORDERED:**

\_\_\_\_\_  
Date Judge

\_\_\_\_\_  
Attorney name (type or print) Bar no.

Address	City	State	Zip	Telephone no.
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Do not write below this line - For court use only