SUPERIOR COURT OF CALIFORNIA • COUNTY OF FRESNO Probate Department, Central Division

1130 'O' Street Fresno, CA 93721 (559) 457-1888

PROBATE COURT TERMINATION OF GUARDIANSHIP QUESTIONNAIRE

When seeking termination of guardianship of a child(ren), the following Guardianship Termination Questionnaire is required to be completed in its entirety and returned to the Probate Clerk's Office. Please include copies of any important information such as parenting class certificates, treatment programs, certificates of completion, school records, etc.

Case Number:	<u> </u>
NAME(S) OF CHILD(REN):	
DOB (listed in the order of children on line above	e):
Child's Address:	School(s):
PETITIONER(S) FOR TERMINATION OF GUAR	RDIANSHIP:
Name:	AKA or Maiden Name:
Best Contact Phone Number:	Work Number:
Driver's License/I.D. No.:	Social Security No.:
Date of Birth: Place of Birth:	
Relationship to Child(ren) on Petition:	
Address:	
Attorney for Petitioner(s):	
Name:	Phone Number:
CURRENT GUARDIAN(S):	
Name: A	KA or Maiden Name:
Address:	
Best Contact Phone Number:	Work Number:

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<u>PARENTS OF MINORS:</u> (Full legal names) If one of the natural parents has died, please mark "deceased" for that person's address and add the date of death, if known.

Name:		AKA or Maiden Name:	
		Work Number:	
Driver's License/I.D. No.:		Social Security No.:	
Date of Birth:	Place of Birth:		
Relationship to Child(ren) on Pe	etition:		
Name:	AKA or Maiden Name:		
Best Contact Phone Number:_		Work Number:	
Driver's License/I.D. No.:		Social Security No.:	
Date of Birth:	Place of Birth:		
Relationship to Child(ren) on Pe	etition:		
ADULTS IN HOUSEHOLD:			
Name:		AKA or Maiden Name:	
Best Contact Phone Number:		Work Number:	
Driver's License/I.D. No.:		Social Security No.:	
Date of Birth:	Place of Birth:		
Relationship to Child(ren) on Pe	etition:		
Name:		AKA or Maiden Name:	
Best Contact Phone Number:		Work Number:	
Driver's License/I.D. No.:		Social Security No.:	

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ADULTS IN HOUSEHOL	D (Cont'd.):		
Date of Birth:	Place of B	Birth:	
Relationship to Child(ren)	on Petition:		
Occupation:			
Name:		AKA or Maiden Name:	
Best Contact Phone Num	ber:	Work Number:	
Driver's License/I.D. No.:		Social Security No.	:
Date of Birth:	Place of B	Birth:	
Relationship to Child(ren)	on Petition:		
Names (List all)	Age DOB	and adult children. Please include Children's Address	School (if going)
EMPLOYMENT:			
Present or Last Employer	:	Address:	
Work Days & Hours:		Employment Began:	Ended:
Type of Work:			
		ng child and spousal support):	
Monthly Expenses:			
Previous Employer:		Address:	

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EMPLOYMENT (Cont'd.):				
Employment Began:	Ended:			
Reason Ended:				
CRIMINAL RECORD:				
Have charges ever been filed against you for any	crime other than traffic citation	ons?		
☐ Yes ☐ No If yes, please specify:				
List Arrests: Where	When	Charge		
1				
2.				
Are you on Probation now?				
Are you on Parole now?	Agent's Name:			
HOUSING:				
Rent Own Buying	Amount Per Month:			
How Many Bedrooms/Bathrooms? /	_ House? Apartmen	t? 🗌		
Do you plan to remain in this residence?	s 🗌 No			
If your answer to the previous question is "No", ho	ow long do you plan to remair [Years]	in your current residence?		
List your residences for the past three years:				

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ADDITIONAL INFORMATION

Please explain, as clearly as possible on the following pages, the information requested. If additional space is needed, use the back of the page and refer to the question number.

aut	additional space is needed, use the back of the page and refer to the question number.			
1.	. Briefly summarize the reasons you are requesting termi	nation of the guardianship.		
2.	. What is the guardian's opinion regarding your request fo	or termination of the guardianship?		
3.	. List any parenting classes or additional program(s) in w enhance your ability to parent. Please provide certificat			
4.	. Please describe the contact you have had with the child in effect.	(ren) since the guardianship has been		
I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Date:				
Тур	ype or print name Sign	nature		