

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NUMBER: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: EMAIL ADDRESS: ATTORNEY FOR (name):	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
GUARDIANSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (name(s)):	CASE NUMBER: HEARING DATE: DEPT.: TIME:
OBJECTION TO PETITION FOR APPOINTMENT OF GUARDIAN	

1. I (name): _____ object to the petition for appointment of a guardian filed by
 (name of petitioner): _____

2. My objection concerns the following child or children (give full name and date of birth for each):

a. Child (name): _____ (date of birth): _____

b. Child (name): _____ (date of birth): _____

If there are more children, identify them on a separate piece of paper, attach it to this form, and label it as Attachment 2.

3. My relationship to the child or children named in item 2 is (tell the court about your connection with the child, children, or family):

If you need more space, use a separate piece of paper, attach it to this form, and label it as Attachment 3.

4. I object to a guardianship of the child or children named in item 2 because (if you think the court should not appoint a guardian, tell the court why):

If you need more space, use a separate piece of paper, attach it to this form, and label it as Attachment 4.

5. I object to the person the petitioner has asked the court to appoint as guardian because (if you think that person should not be the guardian, tell the court why):

If you need more space, use a separate piece of paper, attach it to this form, and label it as Attachment 5.

GUARDIANSHIP OF <i>(name)</i> :	CASE NUMBER:
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6. I object to other requests in the petition because *(if you object to other requests in the petition, tell the court which specific requests you object to and why you object to each one)*:

If you need more space, use a separate piece of paper, attach it to this form, and label it as Attachment 6.

Date:

(TYPE OR PRINT NAME)



(SIGNATURE OF ATTORNEY)

I declare under penalty of perjury under the laws of the State of California that the foregoing, including all attachments, is true and correct.

Date:

(TYPE OR PRINT NAME)



(SIGNATURE OF OBJECTOR)

(TYPE OR PRINT NAME)



(SIGNATURE OF OBJECTOR)

Names and signatures of additional objectors follow last attachment.

