

STATE OF WYOMING)
)SS
COUNTY OF _____)

IN THE DISTRICT COURT
____ JUDICIAL DISTRICT

IN THE MATTER OF THE)
GUARDIANSHIP OF)
)
)
_____,)
An Adult,)

Probate No. _____

CONSENT OR NOMINATION OF GUARDIAN

I, (full name of Proposed Ward) _____, am 14 years of age or older
and:

1. **I consent** to the appointment of _____ (name
of proposed guardian) as my guardian.

OR;

I do not consent to the appointment of _____
(name of proposed guardian) as my guardian pursuant.

OR;

I Nominate _____ (name of proposed
guardian) as my guardian:

Relationship to the Proposed Ward: _____

Street Address: _____

Mailing Address, if different: _____

City: _____ State: _____ Zip Code: _____

Home Phone #: _____ Work Phone #: _____

Email Address: _____.

VERIFICATION AND ACKNOWLEDGMENT

STATE OF WYOMING)
) ss.
COUNTY OF _____)

I, (full name of Proposed Ward) _____, swear/affirm under oath that I have read the foregoing Consent or Nomination of Guardian and that the statements set forth therein are true and correct to the best of my knowledge.

Signature of Proposed Ward

Phone Number: _____

Address: _____

City/State/Zip Code: _____

Subscribed and sworn to before me this _____ day of _____, 20____.

Notary Public/Deputy Clerk of District Court

My Commission/Term Expires: _____