

IN THE MATTER OF

Amended

**Report of  
Guardian ad Litem  
(Guardianship of Minor)**

Case No. \_\_\_\_\_

Date of Birth \_\_\_\_\_

I am the court appointed Guardian ad Litem for the above named minor and report to the court that I have completed the following duties (**except as noted in the "Additional Comments" section at the end of this report**) and make the following report and recommendations:

**GENERAL DUTIES**

**1. INTERVIEWED MINOR AND ADVISED MINOR OF RIGHTS AND PROCEDURE**

On [Date] \_\_\_\_\_ at [Place] \_\_\_\_\_,  
I interviewed the minor and explained to the minor the contents of the petition, the applicable hearing procedure, the right to counsel, and the right to request or continue a limited guardianship.

I advised the minor, both orally and in writing of that person's right: to be present at the hearing; to counsel, including when a lawyer can be appointed; to an independent medical or psychological examination on the issue of competency (at county expense if the person is indigent); to a jury trial; and to appeal.

**2. INTERVIEWED PROPOSED GUARDIAN(S)**

I interviewed the proposed guardian, proposed stand-by guardian, if any, and any other person seeking appointment as guardian.

**3. REVIEWED ADVANCE PLANNING**

I have reviewed any advance planning for financial and health care decision making in which the minor had engaged..

**4. INTERVIEWED AGENT**

I have interviewed any agent appointed by the minor under any document specified above.

**5. RECEIVED NOTICE OF HEARING AND COPIES OF REPORTS**

I have received proper notice of the hearing and copies of any physician's and/or psychologist's reports. If protective placement is being requested, I have received a copy of the comprehensive evaluation and, if applicable, the plan for home or community-based care.

**6. PROVIDED NOTIFICATIONS**

I have notified the petitioner or petitioner's counsel (if any) of the information contained below. I have also notified the appointed guardian (if any) of the duty to be present at and right to participate in the hearing, to present and cross-examine witnesses, to receive a copy of any comprehensive evaluation, and to secure and present a report on an independent evaluation.

**REPORT AND RECOMMENDATIONS**

**7. OBJECTIONS**

The minor:

- |                                   |                               |  |
|-----------------------------------|-------------------------------|--|
| <input type="checkbox"/> does not | <input type="checkbox"/> does | object to the proposed or present placement.           |
| <input type="checkbox"/> does not | <input type="checkbox"/> does | object to the recommendation of the guardian ad litem. |
| <input type="checkbox"/> is not   | <input type="checkbox"/> is   | ambiguous on these matters.                            |

**8. ADVERSARY COUNSEL**

- |                   |                                 |   |
|-------------------|---------------------------------|---|
| Adversary counsel | <input type="checkbox"/> is not | <input type="checkbox"/> is requested by the minor. |
| Adversary counsel | <input type="checkbox"/> is not | <input type="checkbox"/> is recommended.            |

9. **JURY TRIAL**

A jury trial  is not demanded.  is demanded.

10. **MINOR'S ATTENDANCE**

The minor is not required to attend the hearing:

- the minor **does not** wish to attend the hearing.
- the minor **does** wish to attend the hearing.
- the minor is **unable to attend** the hearing in court because of residency in a nursing home or other facility, physical inaccessibility, or a lack of transportation; and the minor, advocate counsel, other interested person, or I request that the court hold the hearing in a place where the minor can attend.  
Specify location requested: \_\_\_\_\_

11. **ADDITIONAL EVALUATIONS**

Additional medical, psychological or other evaluation  is not  is requested. Specify evaluation requested and reason: \_\_\_\_\_

12. **BEST INTERESTS OF MINOR**

Based on my investigation, I recommend that the court find that the minor is substantially:

- capable of caring for himself/herself.
- incapable of caring for himself/herself.
- capable of managing his/her property.
- incapable of managing his/her property.

13. **GUARDIAN OF THE PERSON**

**Powers to be transferred to Guardian of the Person in full or in part.**

I recommend the court find that it is in the best interest of the minor to appoint a permanent guardian of the person of the minor to exercise the following specific powers:

- 1. A. The power to give an informed consent to the voluntary receipt by the minor of a medical examination, medication, including any appropriate psychotropic medication, and medical treatment that is in the minor's best interest, if the guardian has first made a good-faith attempt to discuss with the minor the voluntary receipt of the examination, medication, or treatment and if the minor does not protest.  
 Full Transfer.  Partial Transfer. The minor retains the power to: \_\_\_\_\_
- 1. B. The power to give informed consent, if in the minor's best interests, to the involuntary administration of a medical examination, medication other than psychotropic medication, and medical treatment that is in the minor's best interest.  
 Full Transfer.  Partial Transfer. The minor retains the power to: \_\_\_\_\_
- 2. The power to authorize minor's participation in an accredited or certified research project if the research project might help the minor, or others if minimal risk of harm.  
 Full Transfer.  Partial Transfer. The minor retains the power to: \_\_\_\_\_
- 3. The power to authorize minor's participation in research that might not help the minor but might help others if greater than minimal risk of harm to the minor but evidence indicates minor would have elected to participate.  
 Full Transfer.  Partial Transfer. The minor retains the power to: \_\_\_\_\_
- 4. The power to consent to experimental treatment in the minor's best interests.  
 Full Transfer.  Partial Transfer. The minor retains the power to: \_\_\_\_\_
- 5. The power to give informed consent to receipt by minor of social and supported living services.  
 Full Transfer.  Partial Transfer. The minor retains the power to: \_\_\_\_\_
- 6. The power to give informed consent to release of confidential records other than court, treatment, and patient health care records and redisclosure as appropriate.  
 Full Transfer.  Partial Transfer. The minor retains the power to: \_\_\_\_\_

- 7. The power to make decisions related to mobility and travel.  
 Full Transfer.  Partial Transfer. The minor retains the power to: \_\_\_\_\_
- 8. The power to choose providers of medical, social, and supported living services.  
 Full Transfer.  Partial Transfer. The minor retains the power to: \_\_\_\_\_
- 9. The power to make decisions regarding educational and vocational placement and support services or employment.  
 Full Transfer.  Partial Transfer. The minor retains the power to: \_\_\_\_\_
- 10. The power to make decisions regarding initiating a petition for termination of marriage.  
 Full Transfer.  Partial Transfer. The minor retains the power to: \_\_\_\_\_
- 11. The power to receive all notices on behalf of the minor.  
 Full Transfer.  Partial Transfer. The minor retains the power to: \_\_\_\_\_
- 12. The power to act in all proceedings as an advocate of the minor, except the power to enter into a contract that binds the minor or the minor's property or to represent the minor in any legal proceedings pertaining to the property, unless the guardian of the person is also the guardian of the estate.  
 Full Transfer.  Partial Transfer. The minor retains the power to: \_\_\_\_\_
- 13. The power to apply for protective placement or for commitment.  
 Full Transfer.  Partial Transfer. The minor retains the power to: \_\_\_\_\_
- 14. The power to have care, custody and control of the minor.  
 Full Transfer.  Partial Transfer. The minor retains the power to: \_\_\_\_\_
- 15. Other: \_\_\_\_\_

See attached

15. **GUARDIAN OF THE ESTATE**

I recommend the court find that it is in the best interest of the minor to

- A. appoint a guardian of the estate of the minor to perform duties and exercise powers under §54.19, Wis. Stats., and exercise the powers that do not require court approval under §54.20(3), Wis. Stats., except as retained by the minor as follows: **(Choose one)**
  - (1) The minor retains all rights, except for the following right(s) which will be transferred to the guardian: \_\_\_\_\_
  - (2) All rights will be transferred to the guardian, except for the following right(s): \_\_\_\_\_
  - (3) All rights are transferred to guardian.
- B. authorize the guardian of the estate of the minor to perform the following additional powers (other than to make gifts) that require court approval under §54.20(2), Wis. Stats.: \_\_\_\_\_  See attached
- C. direct that the guardian of the estate of the minor deposit the minor's funds of \$100,000 or less in an insured account of a bank, credit union, savings bank or savings and loan association in the name of the guardian and the minor, payable only upon further order of the court, and waive bond for the guardian of the estate of the minor.

16. **ALTERNATIVE TO GUARDIANSHIP OF ESTATE FOR SMALL ESTATES**

I recommend that the court find that it is in the best interest of the minor to dispense with the appointment of a guardian of the estate of the minor and transfer the minor's funds of \$50,000 or less according to one of the alternatives for small estates under §54.12(1), Wis. Stats., as follows: \_\_\_\_\_

See attached

**17. GUARDIANSHIP, PROTECTIVE PLACEMENT, PROTECTIVE SERVICES**

It is my opinion that the court:

- should  should not appoint a guardian of the person.
- should  should not appoint a guardian of the estate  with bond of \$\_\_\_\_\_.  without bond.
- should  should not approve protective placement.
- should  should not approve protective services.
- should find that the least restrictive placement consistent with the minor's needs and, if the minor has a developmental disability, the most integrated setting appropriate to the needs of the minor, is a:

group home.     foster home.     community based residential facility.     nursing home.  
 intermediate care facility.     Other: \_\_\_\_\_  
 in an unlocked unit.     in a locked unit because: \_\_\_\_\_

See attached

**18. SUITABILITY AND FITNESS OF PROPOSED GUARDIAN**

My recommendation to the court regarding the fitness, suitability and the statement of acts of the proposed guardian(s), standby guardian, any other person seeking to be appointed as guardian is:

NAME	SUITABILITY & FITNESS	COMMENTS ON STATEMENT OF ACTS	TYPE OF GUARDIAN
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> person <input type="checkbox"/> co-guardian <input type="checkbox"/> estate <input type="checkbox"/> standby
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> person <input type="checkbox"/> co-guardian <input type="checkbox"/> estate <input type="checkbox"/> standby
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> person <input type="checkbox"/> co-guardian <input type="checkbox"/> estate <input type="checkbox"/> standby

19. Additional comments: \_\_\_\_\_

See attached

**DISTRIBUTION:**

Original – Court  
 Copies – Petitioner  
           Petitioner’s Attorney

\_\_\_\_\_  
Signature of Guardian ad Litem

\_\_\_\_\_  
Name Printed or Typed

\_\_\_\_\_  
Date

\_\_\_\_\_  
Bar Number