(Copy Receipt) (Clerk's Date Stamp)

SUPERIOR COURT OF WASHINGTON
COUNTY OF SPOKANE

In the Guardianship of: _____ An Alleged Incapacitated Person	CASE NO. _____ PETITION TO ☐ EXTEND TIME OR ☐ WAIVE GUARDIAN TRAINING RCW 11.88.020(3) (PT)

☐ I, _____ am seeking to be appointed as guardian for _____. I have not completed the training required to serve as guardian pursuant to RCW 11.88.020(3). I am not a Certified Professional Guardian.

☐ I, _____ am the Court appointed guardian or limited guardian for the Incapacitated Person named above. I was appointed prior to the effective date of RCW 11.88.020(3), which would require completion of guardian training as I am not a Certified Professional Guardian or authorized financial institution.

I request that the court:

1. ☐ Extend the time period for completion of the lay guardian training required by RCW 11.88.020(3) for a period of ninety days because: _____

_____

_____

2. ☐ Waive the requirement for training as I believe I possess the requested knowledge to serve as guardian in that:

☐ I have successfully served as guardian and fulfilled my duties as such since

_____

☐ I have filed all required reports in a timely manner.

☐ My performance of the duties of guardian are monitored by the following state or local agencies: _____

☐ I have successfully completed the Spokane County Superior Court Guardian Training and a verification has been filed.

☐ There have not been allegations against me or abuse, neglect or breach of fiduciary duty. If such allegations exist, please explain:_____

_____

_____

Presented by:

Signature of Petitioner/Attorney	Printed Name of Petitioner/Attorney, WSBA/CPG#
Address	City, State, Zip Code
*Telephone/Fax Number	Email Address

<u>*Under GR 22 (b) (6), parties' personal telephone number(s) are confidential information. If you do not want your personal phone number(s) on this public form, complete form #S2-Sealed Confidential Information and file in the confidential file.</u>