

(Copy Receipt)

(Clerk's Date Stamp)



In the Guardianship/Conservatorship of:

Case No.:

Respondent / Individual

DECLARATION OF PROPOSED OR
SUCCESSOR GUARDIAN/CONSERVATOR
(NON-CERTIFIED)

(DCLR)

1. Personal Information.

Name of Proposed Guardian/Conservator: _____

List all other names used by the Proposed Guardian/Conservator and dates:

Names: _____

Dates: _____

Names: _____

Dates: _____

Mailing Address of Proposed Guardian/Conservator: _____

Street Address (if different): _____

City/State/Zip: _____

Telephone: Business _____ Personal _____

Fax Number: _____ Email Address: _____

**If proposed Guardian/Conservator does not reside in Washington, provide name, address, phone and email for resident agent:

2. Non-Professional Status. I am NOT serving as a Guardian/Conservator for pay for three or more persons. I acknowledge that before I may serve as a Guardian or

Conservator for three or more persons for pay, I am required to be certified by the Washington Certified Professional Guardian Board.

3. Business Form. If appointed, I will serve as a Guardian/Conservator as an individual person and not serving as an entity or representative of a business entity, such as a trust company or non-profit corporation.

4. Background and Experience Helpful to Service as Guardian/Conservator. I have the following background, education and experience, which may be helpful in my service as Guardian/Conservator:

Education, training and experience: _____

Professional licenses held and dates: _____

5. Relationship to Respondent. I have the following relationship to the Respondent (such as family member, friend, etc.):

_____.

6. Prior History as Fiduciary or Guardian/Conservator.

(a) I have served in a fiduciary capacity (such as an attorney-in-fact pursuant to power of attorney, a trustee, an executor, a personal representative, an administrator, Guardian or Conservator).

Yes No

If yes, please list the county, state, name of the person(s) and date of each appointment:

I have been removed as a fiduciary. Yes No

If the answer to 6(b) is "Yes," describe the county, state, case number and circumstances leading to your removal as a Guardian, Conservator or as a fiduciary, whether for breach of fiduciary duty or for any other reason:

7. Criminal History. Disclose any and all convictions of a crimes involving dishonesty, neglect, or use of physical force or other crime relevant to the functions the individual would assume as guardian. A court may, upon consideration of facts, find

a relative convicted of a crime is qualified to serve as guardian or conservator, or the Court may find the person unsuitable. RCW 11.130.090(1)(b)(i), (ii) and (e)

I have been convicted of such a crime as described above: Yes No

If the answer to the question is "Yes," identify all such convictions, county and state, and date(s):

8. Civil Proceedings. Describe any civil proceedings in which there was a finding you had engaged in dishonesty, misappropriation of funds, breach of fiduciary duty, or mistreatment of any person. Also identify any civil proceeding where there was a settlement, even if such settlement was without specific findings by the Court.

9. Disciplinary Proceedings. Describe any recorded disciplinary proceedings against you by any applicable disciplinary body or licensing agency that resulted in a finding of misconduct. This would include any proceedings by a professional organization such as, but not limited to, a state bar association, a medical disciplinary review board, nursing board, certified professional guardian/conservator board:

10. Ability to Secure Bond. In some cases, it is necessary for the Guardian/Conservator to secure a bond, which is insurance coverage providing protection to the Respondent / Personal Subject to Guardianship or Conservatorship in the event of financial loss or personal harm caused by the negligent or intentional conduct of the appointed Guardian/Conservator. Is there any reason (*such as bankruptcy or poor credit record*) why you may have difficulty obtaining a Guardian/Conservator's bond?

Yes No If yes, please explain:

11. Compensation and Reimbursement. State whether you intend to request hourly or other compensation for your services, the basis for compensation, and describe the expenses for which you expect to be reimbursed.

12. Describe what you or others have done to help prepare you to be a Guardian or Conservator

- a. Reviewed RCW 11.130 with _____ (Name)
- b. Reviewed the Spokane County Superior Court Guardians Manual with _____ (Name).
- c. Reviewed Spokane County Local Rule LSPR 98.20, Estates & Guardianships with _____ (Name).
- d. Other Preparations: _____(Name).

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT TO THE BEST OF MY KNOWLEDGE THE STATEMENTS ABOVE ARE TRUE AND CORRECT.

Signature of Proposed
Guardian/Conservator

Printed Name of Proposed
Guardian/Conservator, WSBA#

Address

City, State. Zip Code

*Telephone/Fax Number

Email Address

RELEASE OF INFORMATION

By my signature below, I authorize the Spokane County Superior Court to have or access the following information:

- 1) To confirm any information provided by me in the Declaration of Proposed Guardian/Conservator through the Judicial Information System, Washington

State Patrol or Judicial Access Browser System. This would include any licensing authorities listed in said declaration regarding my licensing history.

Date: ____

Proposed Guardian/Conservator

***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.**