

COURT CODE: 1395

Your Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____

Email Address: _____

Self-Represented

**IN THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
IN AND FOR THE COUNTY OF WASHOE**

In the Matter of the Guardianship of the:

- Person
- Estate
- Person and Estate

of:

(name of person who has a guardian)
A Protected Person.

CASE NO.: _____

DEPT: _____

CITATION TO APPEAR AND SHOW CAUSE

TO: *(protected person's name)* _____

(protected person's attorney's name) _____

(guardian's names) _____

ALL KNOWN RELATIVES OF THE PROTECTED PERSON:

(Write each relative's name on a separate line) _____

ANY PERSON HAVING THE CARE, CUSTODY, AND CONTROL OF THE PROTECTED PERSON

PLEASE TAKE NOTICE that the following person(s) (*first petitioner's name*)

_____ and (*second petitioner's name, or "n/a" if none*) _____ have filed a petition

asking the court to (*check one*)

Resign as Guardian;

Other: (*name of the petition filed*) _____

DATE AND TIME OF COURT APPEARANCE

(the court clerk will fill this out)

YOU ARE DIRECTED TO APPEAR AND SHOW CAUSE why the court should not grant the relief requested on the:

_____ day of _____, 20____, at _____ a.m. p.m., at the courthouse of the Second Judicial District Court, located at 75 Court Street, Reno, Nevada 89501.

IMPORTANT NOTICE: due to the ongoing COVID-19 pandemic, this hearing will occur using Zoom. The Zoom link will be posted on

<https://www.washoecourts.com/OnlineHearings/GeneralJurisdiction> and may also be obtained by contacting AdultGuardianship@washoecourts.us.

This document does not contain the personal information of any person as defined by NRS 603A.040.

DATED this _____ day of _____, 20____.

ALICIA L. LERUD
CLERK OF COURT

BY: _____
DEPUTY CLERK

NOTE: The guardian(s) and the petitioner(s) must attend the scheduled hearing; all other interested parties do not need to attend unless they want to oppose the relief requested.