

For Court use only:

Temp hrg date: _____

Perm hrg date: _____

**REFERRAL FOR COURT INVESTIGATOR
& QUESTIONNAIRE - GUARDIANSHIP**

Case Number (if you have one): _____

Guardianship of (name): _____ Person Estate

- **Do you think anyone will disagree with the guardianship?** Yes No
If yes, who? Name: _____ Telephone number: _____
- **Has Child Protective Services (CPS) ever been called about the child(ren) in this case?** Yes No
If yes, which County: Santa Clara Other (County name): _____
- **Are there any custody orders about the child(ren) in this case?** Yes No
If yes, which County: Santa Clara Other (County name): _____

Information about the CHILD(REN)

- **Child ① Name:** _____
- **Birth Date:** _____
- **Social Security Number:** _____
- **School, Grade, School Telephone Number:** _____

- **Child ② Name:** _____
- **Birth Date:** _____
- **Social Security number:** _____
- **School, Grade, School Telephone Number:** _____

- **Child ③ Name:** _____
- **Birth Date:** _____
- **Social Security Number:** _____
- **School, Grade, School Telephone Number:** _____

Check if there are more children in the case add information about them on another page.

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REFERRAL FOR COURT INVESTIGATOR & QUESTIONNAIRE - GUARDIANSHIP
(PROBATE)

Information about the PROPOSED GUARDIANS'S ATTORNEY

Proposed Guardian doesn't have an attorney

Name: _____

Address: _____

Phone Number: _____ Fax Number: _____

Information about the PROPOSED GUARDIAN(S)

Proposed Guardian ①:

- Name: _____
- Relationship to child(ren): Grandparent Aunt/Uncle Other: _____
- Birth Date: _____
- Social Security Number: _____
- Driver's License Number: _____
- Home Address: _____
- Home Phone Number: _____ Cell Phone Number: _____
- Work Address: _____
- Work Phone Number: _____ Fax Number: _____

Proposed Guardian ②:

- Name: _____
- Relationship to child(ren): Grandparent Aunt/Uncle Other: _____
- Birth Date: _____
- Social Security Number: _____
- Driver's License Number: _____
- Home Address: _____
- Home Phone Number: _____ Cell Phone Number: _____
- Work Address: _____
- Work Phone Number: _____ Fax Number: _____

All proposed Guardians must answer these questions:

1. Have you ever been convicted of a misdemeanor or felony offense? Yes No

If yes, what offense(s): _____ Date: _____ County: _____

2. Is there a social worker, probation or parole officer supervising you or ANY person who lives with you?
 Yes No

If yes, explain: _____

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 (Probate)**

I/We declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: _____

Proposed Guardian 1 signs here: _____

Date: _____

Proposed Guardian 2 signs here: _____

Information about OTHER ADULTS (age 18 or older) WHO LIVE IN YOUR HOME

- Name: _____
- Birth Date: _____
- Social Security Number: _____
- Driver's License Number: _____ State: _____

- Name: _____
- Birth Date: _____
- Social Security Number: _____
- Driver's License Number: _____ State: _____

- Name: _____
- Birth Date: _____
- Social Security Number: _____
- Driver's License Number: _____ State: _____

- Name: _____
- Birth Date: _____
- Social Security Number: _____
- Driver's License Number: _____ State: _____

- Name: _____
- Birth Date: _____
- Social Security Number: _____
- Driver's License Number: _____ State: _____

More adults live in my home. I've attached information about them on a separate page.

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(Probate)**