			GC-211
ATTORNEY OR PARTY WITHOU	T ATTORNEY (Name, State Bar number, and address):		FOR COURT USE ONLY
TELEPHONE NO.:	FAX NO. (Optional):		
E-MAIL ADDRESS (Optional):	Troction (optional).		
ATTORNEY FOR (Name):			
SUPERIOR COURT OF C	ALIFORNIA, COUNTY OF		
STREET ADDRESS:			
MAILING ADDRESS:			
CITY AND ZIP CODE:			
BRANCH NAME:			
GUARDIANSHIP OF THE	PERSON ESTATE O	F (Name):	
CONSENT OF F	PROPOSED GUARDIAN	CAS	E NUMBER:
NOMINATION OF GUARDIAN			
	APPOINTMENT OF GUARDIAN AND WAIN	/ER OF NOTICE	
I consent to serve as		POSED GUARDIAN state of the minor.	
Date:	2 3 3 3 3 4 1 5 1 1 1 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1	nate of the minut.	
Date.			
	(TYPE OR PRINT NAME)	(SIGNATUE	RE OF PROPOSED GUARDIAN)
	NOMINATION	OF GUARDIAN	
2. I am a parei	nt of the minor a donor of a gift	to the minor. I nominate (nam	ne and address):
as guardian of the	person estate of the n	ninor	
3. I am a parent of the minor a donor of a gift to the minor. I nominate (name and address):			
as guardian of the	person estate of the n	ninor.	
Date:			
(TYPE OR PRINT NAME)		(SIGNATURE)
an adult o Parents or	ian of the person of a minor child ha r is adopted, the court changes guar other interested persons must petit oso unless the judge decides that te	dians, or the court termir ion the court to terminate	nates the guardianship. the guardianship. The court
	CONSENT TO APPOINTMENT OF G	UARDIAN AND WAIVER	OF NOTICE
4. I consent to appointment of the guardian as requested in the Petition for Appointment of Guardian of Minor, filed on			
(date): . I am entitled to notice in this proceeding, but I waive notice of hearing of the petition, including			
notice of any request for independent powers contained in it. I waive timely receipt of a copy of the petition.			
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DATE	(TYPE OR PRINT NAME)	(SIGNATURE)	RELATIONSHIP TO MINOR
	L		
DATE	(TYPE OR PRINT NAME)	(SIGNATURE)	RELATIONSHIP TO MINOR
DATE	(TYPE OR PRINT NAME)	(SIGNATURE)	RELATIONSHIP TO MINOR
Continued on A	,	()	