

IN THE MATTER OF

CASE No. _____

_____,
Ward/Minor Ward/Protected Person.

**APPLICATION AND
AFFIDAVIT FOR
INTERVENTION ON BEHALF
OF THE WELFARE OF THE
WARD/MINOR WARD/
PROTECTED PERSON**

I swear or affirm, **under the penalties of perjury:**

1. I am a person interested in the well-being of the ward/minor ward/protected person.
2. The ward's/minor ward's/protected person's safety, health, or financial welfare is at issue, and these issues are not being adequately addressed by the guardian/conservator, based upon the following facts:

(Attach additional pages for information or evidence)

3. I ask the court to consider the welfare of the ward/minor ward/protected person and issue an ex parte order in his/her best interest. An ex parte order issued under [Neb. Rev. Stat. § 30-2602.01](#) shall remain in full force and effect for no more than 10 days, or until a hearing can be held on this matter, whichever is earlier.

I understand that any interested person that submits an affidavit under this section in bad faith, or submits an affidavit that the court determines lacks a factual basis, shall be ordered to pay the opposing party reasonable attorney's fees and costs.

Signature: _____ Date: _____

Printed Name: _____

Street Address/P.O. Box: _____

City/State/ZIP Code: _____

Telephone Number: _____

Email address: _____

If completed by an attorney:

Bar Number: _____

State of _____)
) ss.

County of _____)

This document was acknowledged before me by _____ ,
this _____ day of _____ , 20_____ .

Notary commission expires: _____

Signature of Judge/Clerk of the Court/Notary Public

Title: _____ Serial Number (if any).: _____