

INSTRUCTIONS FOR MOTION TO MOVE WARD/MINOR WARD/PROTECTED PERSON OUT OF THE STATE OF NEBRASKA

The purpose of this form is to ask permission of the court to move the ward/minor ward/protected person out of the State of Nebraska.

If you are printing the Motion and handwriting the answers, you will check the first box. If you are typing in your answers, you will check the second box.

- Printing the form and handwriting the answers.
- Completing the form electronically.

1. HEADING

- a. Choose the county where the action is filed.
- b. Enter the case number assigned by the clerk of the court.
- c. Enter the name of the ward/minor ward/protected person.

IN THE COUNTY OF COUNTY, NEBRASKA
IN THE MATTER OF Case No.

2. BODY OF FORM

- a. Enter the name of the ward/minor ward/protected person.
- b. Describe your reason(s) for wanting to move the ward/minor ward/protected person out of the State of Nebraska.

As the appointed guardian and/ or conservator for
I ask the court for an Order allowing the move of the ward/minor ward/ protected person out of the State of Nebraska because:

3. SIGNATURE SECTION

- a. If this is a co-guardianship and/or co-conservatorship both must sign.

For the second signature block to appear, check the (a.) “yes” box on the question located below the first signature block:

Is this a Co-guardianship and/or Co-conservatorship? Yes No

- i. The guardian(s) and/or conservator(s) will sign their name(s).
- ii. Enter the date.
- iii. Print the guardian(s) and/or conservator(s) name(s).
- iv. Enter the guardian(s) and/or conservator(s) street address(es).

- v. If this form is completed by an attorney, there is a space for the bar number and firm name.
- vi. Enter the city, state, and zip code of the guardian(s) and/or conservator(s) address(es).
- vii. Enter the guardian(s) and/or conservator(s) telephone number(s) with area code.
- viii. Enter the email address(es).

i.		ii.	
	Signature of Guardian and/or Conservator		Date:
iii.		iv.	
	Print or Type Name		Address
v.		vi.	
	Bar Number and Firm Name (Attorneys Only)		City, State and Zip Code
vii.		viii.	
	Telephone		E-mail address