

COMPLETING THE GLOBAL ACCEPTANCE OF APPOINTMENT FORM

Use this form to accept the appointment as guardian and/or conservator.

Completing the information on the first page will populate the next pages with the correct wording for the type of guardianship and/or conservatorship.

NOTE: If you make an error when choosing an option, clear the form by clicking on the “Clear Form” button at the top of the page and select the correct choices.

Pick **ONE** type from either group A **or** group B.

Do **NOT** choose from more than one group.

Click on the “Clear Form” button **first**.

If group A was chosen, check the box before the type of guardianship and/or conservatorship.

If group B was chosen, check the box before the type of guardianship and/or conservatorship.

Choose the county from the drop-down list.

Enter the case number.

Instructions for use of the Global Acceptance Form

1. Clear the form to ensure no previous entries remain by clicking the button below.

2. Pick the type of guardianship and/or conservatorship this is for from the choices below:
(Choose only one from either group A or group B.)

A. This is a Guardianship and/or Conservatorship for an adult a minor

- Guardianship - Adult
- Guardianship - Adult - No Authority Over The Estate
- Conservatorship - Adult
- Conservatorship - Adult - All Funds Restricted
- Guardianship and Conservatorship - Adult

B. This is a Temporary Guardianship and/or Conservatorship for an adult a minor

- Guardianship - Adult
- Conservatorship - Adult
- Guardianship and Conservatorship - Adult

Name of Ward/Minor Ward/Protected Person:

Name of Guardian and/or Conservator:

Is this a Co-Guardianship and/or Co-Conservatorship? Yes No

Name of Co-Guardian and/or Co-Conservator:

County:

Case Number:

IF you are picking from group **A**, check the box before either “an adult” or “a minor”.

IF you are picking from group **B**, check the box before either “an adult” or “a minor”.

Enter the case information.

For standard guardianships and/or conservatorships:

NOTE:

The information that you entered on the first page will fill in the county, the case number, and the names in the case.

After the signature section has been completed, and you have printed the form, you, and the co-guardian/co-conservator (if any) will initial the spaces at the left of each statement if they apply. If they do not apply, you will write in "N/A" or "not applicable".

IN THE COUNTY COURT OF _____ COUNTY, NEBRASKA

IN THE MATTER OF _____ Case No. _____

_____, ACCEPTANCE OF
Ward APPOINTMENT OF
GUARDIAN

I, _____, and
Name of Co-guardian and/or Co-conservator

I, _____ accept appointment as guardian of
Guardian/Conservator

_____ and swear that I will perform,
Ward

according to law, all duties as guardian.

I acknowledge my responsibilities by *initialing* all of the following:

After Entry of Order of Appointment:
I will file with the court:

- _____ Guardian/Conservator General Information Form (Form CC 16:2.4).
- _____ Address Information Form (Form CC 16:2.5).
- _____ Financial Institution Receipt of Order Form within 30 days (Form CC 16:2.6). Showing I presented the *Order of Appointment* to all financial institutions where the ward/minor ward/protected person has accounts and a printout showing the account balance.
- _____ Inventory and Affidavit of Due Diligence Form within 30 days (Form CC 16:2.9).
- _____ Personal and Financial Information Form (Appendix Ch. 6, Art. 14, App. 8). With full account numbers.
- _____ * Proof of Bond (Form from bonding company).
If a bond was required by the court.
- _____ * Proof of Restricted Account Form (Form CC 16:2.11).
Within 10 days for any accounts restricted by the court.

***If not required by the court, put "N/A" or "Not Applicable"**

After the signature section has been completed, and you have printed the form, you, and the co-guardian/ co-conservator (if any) will initial the spaces at the left of each statement if they apply. If they do not apply, you will write in “N/A” or “not applicable”.

**After Letters of Guardianship and/or Conservatorship are issued:
I will file with the court:**

_____ Financial Institution Receipt of Letters Form within 30 days (Form CC 16:2.6.1). Showing I presented the *Letters of Guardianship and/ or Conservatorship* to all financial institutions where the ward/minor ward/protected person has accounts and a printout showing the account balance.

_____ Updated Financial Information Form (Form CC 16:2.40). With full account numbers if there were changes to the accounts.

I will file with the Register of Deeds:

_____ * The Letters of Guardianship and/or Conservatorship in any county where the ward has real property or an interest in real property, wherever located, within a reasonable time.
(Unless certificate has been previously filed with the court)

Within 90 days after Entry of Order of Appointment, I will:

_____ Attend the Guardianship/Conservatorship training class and file the certificate of completion with the court.

Starting ONE YEAR after Entry of Order of Appointment, I will file Annual Reports (initial the one that corresponds to the Order of Appointment in this case):

_____ PACKET A – Guardian Annual Report (CC 16:2.33)

_____ PACKET B – Guardian with Budget Annual Report (CC 16:2.34)

_____ PACKET C – Conservator Annual Report (CC 16:2.35)

_____ PACKET D – Guardian and Conservator Annual Report (CC 16:2.36)

_____ PACKET E – Guardian (No Authority over Estate) Annual Report (CC 16:2.37)

ALL Guardians and/or Conservators: MUST acknowledge all of the following:

_____ I will notify the court of any address change of the ward/protected person *within 10 days*.

After the signature section has been completed, and you have printed the form, you, and the co-guardian/co-conservator (if any) will initial the spaces at the left of each statement if they apply. If they do not apply, you will write in "N/A" or "not applicable".

If completed by an attorney, enter your Bar Number.

If there is a co-guardian or co-conservator, they will sign the form, and enter their printed name, the date signed, their address, telephone number, and email address.

_____ I will notify the court of the death of the ward/protected person *within 10 days*.

_____ I will file Notice of Newly Discovered Assets (CC 16:2.18) *within 30 days* if I become aware of additional assets in excess of \$500.00 which did not appear on the Inventory last filed with the court.

_____ I will NOT move the ward out of the State without first obtaining court permission

_____ I will NOT make any cash withdrawals and/or get cash back from without a court order.

_____ I acknowledge that I may receive the forms needed to comply with the above requirements from the clerk or my attorney (if I have one). (If you do not have an attorney, you may get the forms from the clerk's office or on the Nebraska Supreme Court website:

<https://supremecourt.nebraska.gov/programs-services/guardianship-conservatorship/forms>)

Signature: _____ Date: _____

Printed Name: _____
(of guardian and/or conservator)

Street Address/P.O. Box: _____

City/State/ZIP Code: _____

Telephone Number: _____

Email address: _____

If completed by an attorney:
Bar Number: _____

Is there more than one guardian and/or conservator? yes no

Signature: _____ Date: _____

Printed Name: _____
(of co-guardian and/or co-conservator)

Street Address/P.O. Box: _____

City/State/ZIP Code: _____

Telephone Number: _____

Email address: _____

If completed by an attorney:
Bar Number: _____

***If not required by the court, put "N/A" or "Not Applicable"**

PRINT

Sign the form, and enter your printed name, the date signed, your address, telephone number, and your email address.

Check the box if there is a co-guardian or co-conservator. If "yes" is checked, the second signature block appears.

Use this button to print the form.

For temporary guardianships and/or conservatorships:

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NOTE:
The information that you entered on the first page will fill in the county, the case number, and the names in the case.

If completed by an attorney, enter your Bar Number.

If there is a co-guardian or co-conservator, they will sign the form, and enter their printed name, the date signed, their address, telephone number, and email address.

IN THE COUNTY COURT OF _____ COUNTY, NEBRASKA

IN THE MATTER OF _____ Case No. _____

_____,
Ward/Protected Person

ACCEPTANCE OF
APPOINTMENT OF
TEMPORARY GUARDIAN
AND TEMPORARY
CONSERVATOR

I, _____, and
Name of Co-guardian and/or Co-conservator

I, _____, accept appointment as temporary
Guardian/Conservator

guardian and temporary conservator of the assets of

Ward/Protected Person

and swear that I will perform, according to law, all duties for the ward/protected person as temporary guardian and temporary conservator.

Signature: _____ Date: _____

Printed Name: _____
(of guardian and/or conservator)

Street Address/P.O. Box: _____

City/State/ZIP Code: _____

Telephone Number: _____

Email address: _____

If completed by an attorney:
Bar Number: _____

Is there more than one guardian and/or conservator? yes no

Signature: _____ Date: _____

Printed Name: _____
(of co-guardian and/or co-conservator)

Street Address/P.O. Box: _____

City/State/ZIP Code: _____

Telephone Number: _____

Email address: _____

If completed by an attorney:
Bar Number: _____

PRINT

Sign the form, and enter your printed name, the date signed, your address, telephone number, and your email address.

Check the box if there is a co-guardian or co-conservator. If "yes" is checked, the second signature block appears.

Use this button to print the form.