#### 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. Instructions for use of the Global Acceptance Form Click on the "Clear Form" button first. **IF** you are picking Clear Form from group **A**, check the box before either "an adult" or (Choose only one from either group A or group B.) "a minor". If group A was A. This is a Guardianship and/or Conservatorship for 🗸 an adult 🔲 a minor chosen, check the Guardianship - Adult - No Authority Over The Estate box before the type **IF** you are picking Conservatorship - Adult of quardianship and/ Conservatorship - Adult - All Funds Restricted from group **B**, check or conservatorship. Guardianship and Conservatorship - Adult the box before either "an adult" or B. This is a Temporary Guardianship and/or Conservatorship for an adult a minor If group B was "a minor". chosen, check the box before the type Conservatorship - Adult Guardianship and Conservatorship - Adult of quardianship and/ or conservatorship. Name of Ward/Minor Ward/Protected Person Choose the Enter the case county from the Name of Guardian and/or Conservator: information. is this a Co-Guardianship and or Co-Conservatorship? V Yes No drop-down list. Name of Co-Guardian and/or Co-Conservator. County: Choose the cour Case Number: Enter the case number.

## For standard guardianships and/or conservatorships:

### Page 1 of 3

#### IN THE COUNTY COURT OF COUNTY, NEBRASKA IN THE MATTER OF Case No. NOTE: ACCEPTANCE OF The information APPOINTMENT OF that you entered GUARDIAN on the first page will fill in the county, the case number, and the Name of Co-guardian and/or Co-conservator names in the case. accept appointment as guardian of Guardian/Conservator and swear that I will perform, Ward according to law, all duties as guardian. **After** the signature I acknowledge my responsibilities by initialing all of the following: section has been After Entry of Order of Appointment: completed, and you I will file with the court: Guardian/Conservator General Information Form have printed the (Form CC 16:2.4). form, you, and the Address Information Form (Form CC 16:2.5). co-guardian/ Financial Institution Receipt of Order Form within 30 days (Form CC 16.2.6). Showing I presented the Order of co-conservator Appointment to all financial institutions where the ward/minor (if any) will initial the ward/protected person has accounts and a printout showing the account balance. spaces at the left of Inventory and Affidavit of Due Diligence Form within 30 days each statement (Form CC 16:2.9). if they apply. Personal and Financial Information Form (Appendix Ch. 6, Art. 14, App. 8). With full account numbers. If they do not apply, \* Proof of Bond (Form from bonding company). you will write in If a bond was required by the court. \* Proof of Restricted Account Form (Form CC 16:2.11). "N/A" or "not Within 10 days for any accounts restricted by the court. applicable".

not required by the court, put "N/A" or "Not Applical

## Page 2 of 3

After Letters of Guardianship and/or Conservatorship are issued:

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".

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)
History O	0 days after Entry of Order of Appointment, I will:
w unun 3	Attend the Guardianship/Conservatorship training class and file
	the certificate of completion with the court.
	the certainine 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 Gus	ardians 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.

# Page 3 of 3

I will notify the court of the death of the ward/protected person

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:  **Clisty Tester Address of Code:**  Printed Name:**  (of guardian and/or conservator)  Street Address of D.O. Box:**  City/State/ZIP Code:**  Telephone Number:**  Email address:**  If completed by an attorney:**  Bar Number:**  Date:**  Printed Name:**  (of co-guardian and/or co-conservator)  Street Address of D.O. Box:**  City/State/ZIP Code:**  Telephone Number:**  Printed Name:**  (of co-guardian and/or co-conservator)  Street Address of D.O. Box:**  City/State/ZIP Code:**  Telephone Number:**  Email address:**  If completed by an attorney:**  Bar Number:**  Bar Number:**  Email address:**  If completed by an attorney:**  Bar Number:**  Email address:**  If completed by an attorney:**  Bar Number:**  Bar Number:**  Telephone Number:**  Telephone Number:**  Telephone Number:**  Email address:**  If completed by an attorney:**  Bar Number:**  Bar Number:**  Telephone Number:**		within 10 day				
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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:  **Supreme.court.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:  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:  Street Address/P.O. Box:  City/State/ZIP Code:  Telephone Number:  Email address:  If completed by an attorney:				ranuals and/or o	at each back from	
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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:

#### Page 1 of 1

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