

STATE OF INDIANA)
)
COUNTY OF ELKHART)

IN THE ELKHART SUPERIOR COURT 6

CASE NO: _____

IN RE THE GUARDIANSHIP OF:

Name of Incapacitated Person

INCAPACITATED PERSON'S WAIVER AND REQUEST

I hereby state:

1. I am the person alleged to be the incapacitated person in this case.
2. I have received and read a copy of the PETITION FOR APPOINTMENT OF GUARDIAN ("Petition") seeking the appointment of _____ as Guardian, which Petition is to be filed with the Elkhart County Superior Court 6.
3. I enter my general appearance with respect to the Petition.
4. I waive the issuance and service of notice of hearing upon the Petition.
5. I request that the Court enter an Order granting the Petition because I believe it is in my best interest.

I affirm under the penalties for perjury that the foregoing representations are true.

Signature

Date

Printed Name

Email Address

STATE OF INDIANA

COUNTY OF _____

Before me, _____ a notary public in and for _____ County, State of Indiana, personally appeared _____, and he/she having been first duly sworn upon his/her oath, says that the facts all alleged in the foregoing instrument are true.

Date: _____

Notary Public: _____

My Commission Expires: _____