



COLUMBIA COUNTY

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**Columbia County Circuit Court
Register in Probate Office**

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GUARDIANSHIP OF AN ADULT: (DUE TO INCOMPETENCY)

Revised 1/2023

Please Note: This Guideline is provided as a public service and is not intended to be legal advice. If you have any question about the form or the procedure, please contact an attorney as Probate staff members cannot give legal advice.

Forms: You may access all guardianship forms on the internet at: <http://www.wicourts.gov/forms1/circuit.htm>

TO START prepare an original and bring at least one copy with you for filing the following:

Form Number	Name of Form
GN-3100	Petition for Temporary/Permanent Guardianship due to Incompetency Note: (if applicable) see page two for additional information & form for a request for temporary guardianship.*
GN-3110	Order and Notice of Hearing
GN-3130	Examining Physician's or Psychologist's Report
GN-3140	Statement of Acts/Consent to Serve as Guardian NOTE: One to be completed by any proposed guardian and stand-by and file with the petition or 96 hours prior to hearing
GN-3115	Waiver and Consent to Petition for Guardianship – NOTE: any interested party may sign if they are waiving and consenting to the petition for guardianship
GF-131A This form will be completed by the Court and mailed to all interested parties	Order Appointing Guardian Ad Litem (GAL) NOTE: The Court will require a Guardian ad Litem (GAL) to be appointed to represent the best interests of the alleged incompetent in any action for guardianship of the person or estate. Upon completion of the guardianship petition, the Court will determine and order parties to pay the GAL fees.
GAL Deposit for all guardianship petitions	\$500 deposit for Guardian ad Litem fees must be paid at the time of filing the Petition and will apply to the GAL bill

SCHEDULED HEARING: A hearing date will be scheduled with the current Intake Judge. The individual must be at least 17 years and 9 months of age as of the date of the hearing. After the Court has sign GN-3110 Order and Notice of Hearing and GN-131 Order Appointing GAL, the petitioner will need to proceed with giving notice.

GIVING NOTICE: The petitioner must serve a copy of all documents to all interested parties, including any appointed GAL. Please review Wisconsin Statute Sections or the Notice and Service Requirement under Ch. 54 and Ch. 55 for proper notice requirements. Personal service may be required on the proposed ward.

Please note a copy is required to be provided to Columbia County Corporation Counsel: PO Box 63, Portage, WI 53901.

BEFORE THE HEARING the following must be completed and filed in the Register in Probate Office:

Form Number	Name of Form
GN-3120	Affidavit of Service -- showing the date you mailed or personally served a copy of the Order for Hearing and Petition to all interested parties.
GN-3135	Confirmation of Completion of Guardian Training Program - showing that you have completed the required guardian training program. Attach the training certificate to this form. *See Instructions to Access Guardian Training attached to this checklist.
Will be completed and filed by GAL	Report of Guardian ad Litem

AT THE HEARING DATE:

Form Number	Name of Form
The Judge will review the case to determine the following has been filed:	Consent to Serve/Statement of Acts by proposed guardians & any standby, Affidavit of Service (all interested parties were provided notice of hearing and petition), GAL report on file and Doctor's Report is on file
GN-3170	Determination and Order on Petition for Guardianship due to Incompetency **
GN-3200	Letters of Guardianship of the Person
GN-3210	Letters of Guardianship of the Estate
GN-2006	Signature Bond (if applicable)
GN-3520	Notice of Change of Address – to report a change of address for guardian or ward

** Note: If waiver of bond and restricted account is requested pursuant to Sec. 54.46, Wis. Stats., be sure to check the appropriate boxes on the Petition and Determination and Order

A GUARDIAN OF THE ESTATE MUST FILE AN INVENTORY NO LATER THAN 60 DAYS FROM DATE OF APPOINTMENT: Guardianship Inventory with filing fee of .2% of assets or a minimum of \$20

ANNUAL REVIEW: The probate court will send you a notice in January of each year. The following forms will be due by April 15:
GUARDIAN OF THE ESTATE - Account of Guardian or Conservator (Form Number GN-3500)
GUARDIAN OF THE PERSON - Annual Report of Guardian (from number GN-3480)

OTHER FORMS may be needed after guardianship has been order:

- GN-3450 Statement of Ward's Real Property filed with Register of Deeds
- GN-3570 Petition to Authorize/Confirm Sale/Mortgage/Lease of Income and Assets
- GN-3630 Petition to Authorize Transfer of Income/Assets of Person

CERTIFIED COPIES: If you need certified copies of the Letter of Guardianship or any other form, the cost is \$3.00 for the certification and \$1.00 for each page copied or compared, per Section 814.66 Wis. Stats.

*** Additional Forms for Temporary Guardianship** – appointed under 54.50. The court can appoint a temporary guardianship if it is demonstrated that a proposed ward's particular situation requires immediate appointment of a temporary guardian. The hearing may be held no earlier than 48 hours unless good cause is shown. Temporary guardianships are good for only 60 days & can be extended once for 60 days.

Form Number	Name of Form
GN-3100	Petition for Temporary/Permanent Guardianship due to Incompetency
GN-3110	Order and Notice of Hearing – Temporary Guardianship ➤ Refer to the statute for proper service of petitions for temporary guardianship.
GN-3230	Consent to Serve as Temporary Guardian – to be completed by proposed temporary guardian if you are asking for temporary guardianship
GN-3250	Order on Petition for Temporary Guardian
GN-3260	Letters of Temporary Guardian of the Person

	GN-3265	Letters of Temporary Guardian of the Estate
	GN-3270	Petition to Extend Temporary Guardianship
	GN-3280	Order to Extend Temporary Guardianship

Additional Forms for Petition for Protective Placement/Services – appointed under Chap. 55. The following documents will be filed if proposed ward's particular situation requires an order for protective placement.

	Form Number	Name of Form
	GN-4040	Petition for Protective Placement/Protective Services (if applicable) NOTE: This form is only required if you are requesting an order for protective placement or protective services.
	GN-3110	Order and Notice of Hearing
	Available at Register in Probate Office	Order for Comprehensive Evaluation and Release of Information. NOTE: <ul style="list-style-type: none"> ➤ This form is only required if you are requesting an order for protective placement or protective services. ➤ A copy of the order must be sent or hand delivered to Columbia County Health & Human Services: 111 E. Mullett Street, PO Box 136, Portage, WI 53901 within five days of filing petition.
	Will be completed and filed by HHS	Comprehensive Evaluation NOTE: This evaluation will only be filed if you filed a petition for protective placement/services.

Other Resources: Wisconsin Law Library <http://wsll.state.wi.us/topic/familylaw/guardian.html>
Greater Wisconsin Agency on Aging Resources, Inc. www.gwaar.org
Wisconsin Register Probate Association www.wripa.org
Wisconsin Guardianship Association (WGA): www.wisconsinguardianshipassociation.com

THE NAMES OF THE INTERESTED PARTIES AND OTHERS ENTITLED TO NOTICE WORKSHEET
ADULT GUARDIANSHIP/PROTECTIVE PLACEMENT

Please Note: This Guideline is provided as a public service and is not intended to be legal advice. If you have any question about the form or the procedure, please contact an attorney as Probate staff members cannot give legal advice.

If completed correctly, ANYONE listed on this worksheet is an interested party and must be listed on your petition & served notice.

RELATIONSHIP		NAME	MAILING ADDRESS
PETITIONER'S NAME			
List the PROPOSED WARD			
List any EXISTING GUARDIAN			
Who are the PROPOSED GUARDIAN(S) and STANDBY GUARDIAN(S)?	PERSON		
	ESTATE		
	STANDBY		
Does the proposed ward have an ATTORNEY?			
Does the proposed ward have a spouse?	<input type="checkbox"/> NO <input type="checkbox"/> YES If yes, list spouse		
If there is a spouse, are there any ADULT CHILDREN of any previous marriages?	<input type="checkbox"/> NO <input type="checkbox"/> YES If yes, list the adult children		
If there is no spouse, are there any ADULT CHILDREN of the proposed ward? NOTE: IF there is a spouse, it may be beneficial to list and notice adult children of the current marriage also.	<input type="checkbox"/> NO <input type="checkbox"/> YES If yes, list all the adult children		
If there is no spouse and no adult children, are the proposed ward's PARENTS living?	<input type="checkbox"/> NO <input type="checkbox"/> YES If yes, list the biological parent	MOTHER:	
		FATHER:	
If no spouse, no adult children, and no parents, LIST "any presumptive adult heirs as specified in §851.09 ...":	Adult grandchildren Adult brothers & sisters Adult nieces & nephews for any deceased siblings		
LIST THE GUARDIAN AD LITEM	If one is not appointed, one will be		
County Corporation Counsel		Columbia County Corporation Counsel	PO BOX 63 Portage, WI 53901
Does the proposed ward have any POWER OF ATTORNEY? documents?	<input type="checkbox"/> NO <input type="checkbox"/> YES If yes, list any agent named (whether the		

	document is activated or not)		
List any person/facility who has legal or physical custody of the proposed ward			
Is there any trust established by or for benefit of the proposed ward	<input type="checkbox"/> NO <input type="checkbox"/> YES If yes, list the trustee		
Is the proposed ward being paid or payable by Federal Department of Veterans Affairs?	<input type="checkbox"/> NO <input type="checkbox"/> YES If yes, list representative from Fed Dept. of VA		
Is the proposed ward being paid or payable by State Department of Veterans Affairs	<input type="checkbox"/> NO <input type="checkbox"/> YES If yes, list representative from State Dept. of VA		
Is the proposed ward receiving long-term support services/benefits?	<input type="checkbox"/> NO <input type="checkbox"/> YES If yes, then list County Department of Human/Social Services		
Does the proposed ward receive aid or assistance from any public or private agency, charity or foundation?	<input type="checkbox"/> NO <input type="checkbox"/> YES If yes, list any of the agency, charity or foundation		
Other:			

***** PLEASE NOTE: THIS WORKSHEET CAN NOT BE USED AS AN ATTACHMENT TO THE PETITION FOR TEMPORARY/PERMANENT GUARDIANSHIP OR TO THE PETITION FOR PROTECTIVE PLACEMENT TO LIST THE NAMES AND MAILING ADDRESSES OF ALL THE INTERESTED PARTIES.**

****** IMPORTANT INFORMATION ABOUT THIS SAMPLE:**

This is only sample to show how the interested parties should be listed on the petition. You will need to list YOUR interested parties on the petition.

5. The names and mailing addresses of all interested parties (including the petitioner) and all others entitled to notice are as follows:

Name	Relationship	Mailing Address [Street, City, State, Zip]
Henry Smith	Proposed ward	% The Care Center, 444 Big Street, City, WI 12345
Louise Smith	Petitioner, spouse & proposed guardian of the person and estate	123 Main Street, City, WI 12345
Lisa Richards	Daughter & proposed standby guardian of person	222 River Road, City, WI 12345
John Richards	Son & proposed standby guardian of estate	333 Black Street, City, WI 12345
The Care Center	CBRF/Facility	444 Big Street, City WI 12345
Columbia County	Corporation Counsel	PO Box 63, Portage, WI 53901
Guardian Ad Litem	To be appointed	
*** continue to list all other interested parties		

Instructions to Access Guardian Training

*Required for permanent guardians of the person and permanent guardians of the estate, unless exempt under Wis. Stat. § 54.26(2).

1. Go to: <https://www.uwgb.edu/guardianship-training/>
2. Scroll halfway down the page until you see “**Enroll Now**”.
 - Click “**Take the Training**” button.
3. If you have registered with UW Green Bay before, enter your username and password and click the “**Sign In**” button.
If you have not registered with UW Green Bay before, click the “**Sign Up**” button.
 - Complete the requested account information.
4. Click the provided link to start the training course:
(<https://uwgreenbay.catalog.instructure.com/courses/guardian-training>)
5. Under **Guardian Training, Self-paced**, click the “**Enroll Now**” button and then fill in the requested information (Do not click the shopping cart button).
6. Enter the requested information. Click “**Register New Account**” button.
7. Click the “**Enroll**” button.
8. Click the “**Go to Courses**” button. Wait a few minutes and then check your e-mail.
9. You will receive multiple e-mails from UW Green Bay. The e-mail with the subject “**Welcome to Catalog**” will contain your login ID, so please keep the e-mail for future reference.
 - Click “**Complete Registration**” button at the bottom of that e-mail.
 - Create a password as requested.
10. Click the “**Go To Course**” button.

All modules must be completed for the training to be complete.

To log in later to complete the training:

1. Go to: <https://uwgreenbay.catalog.instructure.com/courses/guardian-training>
2. In the upper right-hand corner, click “**Login**”.
3. Click on “**UW Continuing Education Student**”.
4. Add your login and password. Click “**Log In**”.
5. Click “**Go To Course**”.