

Person Filing: _____
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Telephone: _____
Email Address: _____
Lawyer's Bar Number: _____



Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

In the Matter of the Guardianship of:

Case Number: JG _____

PETITION FOR TERMINATION OF GUARDIANSHIP OF A MINOR

A Minor

1. INFORMATION ABOUT THE APPOINTMENT OF GUARDIAN:

Name _____ was appointed GUARDIAN and accepted the appointment on _____ (date).

Guardian's address: _____

2. INFORMATION ABOUT THE WARD: (the minor for whom Guardian was appointed)

_____ Date of Birth ____ / ____ / ____.
(Name of Minor)

One of the following documents is attached as proof of the Ward's age:

- A copy of the minor's birth certificate; or
- A copy of the minor's drivers license.

3. REASON FOR TERMINATION OF THE GUARDIANSHIP: (check one box)

- The Ward reached the age of 18, on _____ (date); OR
- The need for the Guardianship has terminated because the rights of the parents are no longer suspended or terminated by parental consent, or circumstances, or by prior court order because (explain):

OR

The need for the Guardianship has terminated because the Ward has died. The date of death was _____ (Attach copy of death certificate).

THEREFORE, I ask the court to enter an order terminating the Guardianship and discharging the named Guardian in Case Number JG_____

OATH OR AFFIRMATION AND VERIFICATION OF PETITIONER

By signing this document I state to the Court, under penalty of perjury, that I have read this Petition and that all the information contained in it is true, correct and complete to the best of my knowledge and belief.

Signature of Petitioner (may be the Ward, if 18 or older)

STATE OF _____

COUNTY OF _____

Subscribed and sworn to or affirmed before me this: _____ by
(date)

_____.

(notary seal)

Deputy Clerk or Notary Public

OATH OR AFFIRMATION AND VERIFICATION OF THE WARD

(if the Ward is not the Petitioner who signed above)

By signing this document, I state to the Court, under penalty of perjury, that I have read this Petition and that all the information contained in it is true, correct and complete to the best of my knowledge and belief.

Signature of (Former) Minor

STATE OF _____

COUNTY OF _____

Subscribed and sworn to or affirmed before me this: _____ by
(date)

_____.

(notary seal)

Deputy Clerk or Notary Public