



## Judicial Council of California

455 Golden Gate Avenue · San Francisco, California 94102-3688

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# INVITATION TO COMMENT

## SPR26-35

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**Title**

Probate Conservatorship: Revisions to Petitions, Orders, and Letters

**Action Requested**

Review and submit comments by May 18, 2026, to [invitations@jud.ca.gov](mailto:invitations@jud.ca.gov)

**Proposed Rules, Forms, Standards, or Statutes**

Adopt forms GC-309, GC-309B/GC-310B, GC-309C/GC-310C, GC-339, GC-339B/GC-340B, GC-339C/GC-340C, and GC-350A; revise forms GC-310, GC-340, and GC-350

**Proposed Effective Date**

January 1, 2027

**Contact**

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**Proposed by**

Probate and Mental Health Advisory Committee  
Hon. Jayne Chong-Soon Lee, Chair

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### Executive Summary and Origin

To implement portions of Assembly Bill 1663 (Stats. 2022, ch. 894) and to make conservatorship forms more accessible and user-friendly, the Probate and Mental Health Advisory Committee proposes adopting seven forms for mandatory use and revising three mandatory forms. The proposal will provide new forms for a petition and for an order for appointment of a limited conservator, and new attachments for use in both general and limited conservatorships. The committee intends for the proposal to simplify the forms and make them more intuitive and understandable for self-represented litigants, conservators, and proposed conservatees.

### Background

California conservatorship law has undergone many changes over the past 18 years. Beginning with the Omnibus Conservatorship and Guardianship Act of 2006,<sup>1</sup> the Legislature has enacted

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<sup>1</sup>The Omnibus Act comprised Assembly Bill 1363 (Stats. 2006, ch. 493), and Senate Bills 1116 (Stats. 2006, ch. 490), 1550 (Stats. 2006, ch. 491), and 1716 (Stats. 2006, ch. 492). See also Assembly Bill 1727 (Stats. 2007, ch. 553) (Omnibus Act cleanup legislation).

*This proposal has not been approved by the Judicial Council and is not intended to represent the views of the council, its Rules Committee, or its Legislation Committee. It is circulated for comment purposes only.*

multiple measures intended to protect the rights and interests of conservatees and persons for whom appointment of a conservator is proposed,<sup>2</sup> and to clarify the duties of conservators.

In 2022, Assembly Bill 1663 amended the conservatorship statutes in several respects and reaffirmed the distinctions in conservatorships for persons with developmental disabilities.<sup>3</sup> AB 1663, in part, amended Probate Code section 1800.3 to require that the court deem a petition for conservatorship to be a petition for a limited conservatorship if the court becomes aware that the proposed conservatee has a developmental disability, and the petition is not requesting special authority for major neurocognitive disorders (such as dementia).

Currently, mandatory *Petition for Appointment of Probate Conservator* (form GC-310) is the only form for petitions seeking appointment of a probate conservator, a limited probate conservator, or a successor probate conservator of an individual's person, estate, or both.<sup>4</sup> While it provides the basic information required by the probate code, the combination of these different requests into a single form requires a petitioner to have extensive knowledge of the different types of conservatorships and the legal and factual elements required to establish the need for each. It also requires the petitioner to draft as many as seven separate attachments to include all the orders that may be requested.

In addition, the petition form to establish a probate conservatorship (form GC-310) has not been updated since 2019, the appointment order form (form GC-340) has not been updated since 2016, and the form for the letters (form GC-350) has not been updated since 2015. Accordingly, some of the language included in the forms is outdated and needs to be corrected to conform to the current law; specifically, the orders and letters still use “dementia,” which was updated to “major neurocognitive disorder” by Senate Bill 413 (Stats. 2017, ch. 122).

## The Proposal

The Probate and Mental Health Advisory Committee proposes adopting seven forms for mandatory use and revising three mandatory forms to assist in the application of AB 1663, comply with existing law, and make the forms more user-friendly. The committee proposes separating the process for appointing limited and general probate conservatorships by adopting

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<sup>2</sup> This proposal uses “(proposed) conservatee” to refer collectively to these categories of persons (conservatees and proposed conservatees) when appropriate.

<sup>3</sup> Other provisions of AB 1663 have already been implemented by the Judicial Council and as such are not included in this proposal. See Judicial Council of Cal., Advisory Com. Rep., *Probate Conservatorships: Less Restrictive Alternatives* (July 17, 2023), <https://jcc.legistar.com/View.ashx?M=F&ID=12246541&GUID=2D040B09-36A5-4157-85D0-428F176C4608>; Judicial Council of Cal., Advisory Com. Rep., *Probate Conservatorship: Confidential Declaration Forms* (August 15, 2024), <https://jcc.legistar.com/View.ashx?M=F&ID=13260199&GUID=5EE6E7D9-7B32-43C9-9BCE-65541A651F29>; and Judicial Council of Cal. Advisory Com. Rep., *Probate Conservatorship: Information for Conservatees* (October 24, 2025), <https://jcc.legistar.com/View.ashx?M=F&ID=14843503&GUID=8ED4D076-E2FE-4391-B0E4-2D7222E15C1A>.

<sup>4</sup> This proposal uses “general conservatorship” to refer to conservatorships under the Probate Code that do not meet the specific requirements of a limited conservatorship.

separate petitions and orders and revising current forms as needed. In addition, the committee proposes adopting standardized attachments for both the petitions and orders of the most common relief requested, and revising existing forms as needed.

***Adopt Request for Appointment of Probate Limited Conservator Over Adult With Developmental Disability (Petition for Appointment) (form GC-309)***

The committee proposes adopting the new mandatory petition *Request for Appointment of Probate Limited Conservator Over Adult With Developmental Disability (Petition for Appointment)* (form GC-309). This form would only be used to request a limited conservatorship, which is a conservatorship over a person with developmental disabilities. The form contains all of the information required to be in a petition by Probate Code section 1821, but has been designed to make it easy for self-represented litigants to use, with a simplified layout and the use of plain language wherever possible, including in the title of the form.<sup>5</sup> The proposed form is at an 8th grade reading level.<sup>6</sup> This form clearly delineates when a limited conservatorship is being requested, so the court can more easily apply the law as amended by AB 1663 to deem a conservatorship a limited conservatorship when it is requested for a developmentally disabled person. This will also assist the court in providing the correct advisement to the proposed conservatee as set forth in Probate Code section 1828.5 and allow the court investigator to inform the proposed conservatee of the contents of the petition, as required by Probate Code section 1826.

The form also lists each specific power that a court may grant in a limited conservatorship, along with a brief explanation of each power. This is an improvement over the current version of form GC-310, which requires the petitioner to create an attachment and write the powers requested. Some counties have created their own attachments to the petition form to express the special powers and limits requested for limited conservatorships as required by Probate Code section 2351.5(b), signaling a need for statewide forms.

For item 8g, the committee considered including an instruction that would direct the petitioner to request a conservatorship of the estate when requesting the power to enter into contracts on behalf of the limited conservatee. The committee concluded that courts may interpret the requirements for granting the power to enter into contracts differently. Therefore, the committee proposes that the request regarding contracts only remove the power of the limited conservatee to enter into contracts, which closely tracks the language used in Probate Code section 2351.5.<sup>7</sup>

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<sup>5</sup> Judicial Council staff conducted two rounds of user testing sessions to assess the wording, formatting, and usability of proposed form GC-309. Volunteers were observed completing the form, noting errors and sections of the form that were confusing. Improvements to the form were made based on these observations.

<sup>6</sup> The reading level of the form was determined using the Flesch-Kincaid readability scale, which is used by federal and state agencies to assess the readability of documents and the level of education generally required to understand the text.

<sup>7</sup> Probate Code section 2351.5(b)(2) provides the court authority over the “right of the limited conservatee to contract.”

### **Revise *Petition for Appointment of Probate Conservator* (form GC-310)**

The committee proposes revising this form to only be used as a petition for general conservatorships by removing the options that only apply to a limited conservatorship.<sup>8</sup> The revisions are also recommended to maintain consistency with the language and structure of proposed form GC-309. It should be noted that the changes to the form were so extensive that all the changes are not highlighted on the proposed form. Changes to the form include:

- Retitling the form to *Request for Appointment of Probate Conservator (Petition for Appointment)*;
- Updating the caption to include the request for appointment of a joint conservator;
- Revising the instructions on page 1 to explain when the form should be used;
- Removing the questions that are related only to a limited conservatorship or a conservatorship of the estate; and
- Reorganizing the format to be more user-friendly and use plain-language terminology.

The proposed form is at an 8th grade reading level, reduced from a 15th grade reading level. The proposed attachments for the estate (form GC-309B/GC-310B) and joint conservator (form GC-309C/GC-310C), discussed below, would serve as attachments to this petition, when applicable.

### **Adopt *Estate Attachment to Request for Appointment of Probate Conservator* (form GC-309B/GC-310B)**

Proposed form GC-309B/GC-310B will be required only when a conservatorship of the estate is requested. Most items contained in this new proposed form are currently on petition form GC-310. New items include specific powers that are required in limited conservatorship proceedings.<sup>9</sup> As a majority of self-represented litigants in conservatorship cases request a conservatorship of the person only, using a separate form for items only relevant to conservatorships of the estate will simplify the petition forms. In the new form GC-309 and proposed revised form GC-310, the request for conservatorship of the estate is still included in the petitions but directs the petitioner to complete proposed form GC-309B/GC-310B. This will reduce confusion by simplifying the petitions to require only the information necessary for the conservatorships of the person while also allowing the petitioner to designate a different proposed conservator of the estate, if any. It will clarify the identity of the proposed conservator of the estate by providing space for the person's name and contact information to be separately stated in the attachment.

Form GC-309B/GC-310B also adds plain-language instructions on how to value the estate, an explanation of the bond, and the necessary information regarding the size of the estate and the

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<sup>8</sup> Assem. Bill 1663.

<sup>9</sup> See Item 4.

bond request for easy completion. The proposed form also details the additional powers that can be granted to a conservator of the estate, limiting the number of attachments that need to be created by petitioners.

***Adopt Joint Conservator Attachment to Request for Appointment of Probate Conservator (form GC-309C/GC-310C)***

Form GC-309C/GC-310C would allow those requesting multiple conservators (also known as joint conservators) to submit each conservator's information on separate forms. Petitioners can provide clear and accurate information (such as their relationship to the proposed conservatee) as to each person or entity, thereby making it clear to the court what information applies to each proposed conservator. Currently, form GC-310 only has space for one petitioner, one proposed conservator of the person, and one proposed conservator of the estate. Proposed form GC-309C/310C also adds plain-language instruction explaining the legal effects of appointing a joint conservator, such as the requirement that joint conservators agree on decisions.<sup>10</sup>

***Adopt Order Appointing Limited Probate Conservator (form GC-339)***

Form GC-339 includes findings and orders for the appointment of a limited conservator as required by Probate Code section 1830. This proposed form is needed to ensure that the court properly deems a conservatorship of a person with developmental disabilities as a limited conservatorship as required by AB 1663 by including all the orders allowed under a limited conservatorship, and removing the need for the litigants to create an attachment. As more fully described below, the form also refers to mandatory attachments for use when a conservatorship of the estate is granted or a joint conservator is appointed.

***Revise Order for Appointment of Probate Conservator (form GC-340)***

The committee proposes revising the order to match the formatting and style of the proposed revised petition form GC-310 and the other proposed new forms. The proposed changes to the form were so extensive that all the changes are not highlighted. Changes to the form include:

- Adding the options of the appointment of a joint conservator;
- Clearly designating the identity of the conservator of the person and the conservator of the estate, if they are different people, and providing separate findings for each;
- Removing sections used to grant authority specifically to a limited conservator or a conservator of the estate; those findings and orders would be included in the new order and attachments discussed above;
- Providing the most common orders that can be additionally granted rather than requiring the petitioner to create another attachment; and

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<sup>10</sup> Prob. Code, § 2105.

- Updating the language to conform with the changes in terminology related to major neurocognitive disorders, formerly referred to as dementia.<sup>11</sup>

**Adopt Additional Orders Regarding Conservatorship of the Estate (form GC-339B/GC-340B)<sup>12</sup>**

This proposed form is for use as an attachment to the limited conservatorship order (form GC-339) or the general conservatorship order (form GC-340). Similar to the separate estate attachment to the underlying petition (form GC-309B/GC-310B), this form will reduce confusion as petitioners will not need to create their own attachments and incorrectly identify or explain the powers granted. This form includes the bond information and mirrors the estate attachment to the petition forms. It also provides the details of the property, contracts, and claims the conservator is entitled to manage as required by Probate Code section 1830 for limited conservatorships, as well as fillable space for specifying additional estate powers granted in either the limited or general conservatorship.

**Adopt Additional Orders Regarding Joint Conservators (form GC-339C/GC-340C)**

This proposed form is an attachment to the limited conservatorship order (form GC-339) or the general conservatorship order (form GC-340) to provide orders regarding each joint conservator for increased clarity as to the specific findings made for each conservator as well as addressing the current problem of lack of space to provide information about more than one conservator. It also provides an option to refer to previous orders, thereby reducing the need for the parties to duplicate work.

**Revise Letters of Conservatorship (form GC-350)**

Revisions are needed to this form to update terminology, such as using “major neurocognitive disorder” instead of “dementia,” to comply with the law.<sup>13</sup> The committee also proposes adding space for information about more than one conservator, adding descriptive headings in item 3, and adding the public guardian and financial institutions as options in the affirmation section to accurately reflect the affirmation requirements for each type of conservator.

**Adopt Additional Powers for Limited Conservatorship (form GC-350A)**

The committee proposes adopting form GC-350A as an attachment to *Letters of Conservatorship*, to specify the special powers that can only be granted in a limited conservatorship—such as the ability to control the conservatee’s right to choose their own residence. The powers are listed in the same format as the petition (form GC-309) and order (form GC-339).

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<sup>11</sup> Prob. Code, § 2356.5.

<sup>12</sup> The form numbers match the underlying attachment form. Since the GC-310(A-PF) does not require a form to be attached to the order, the committee elected to not use GC-339A/GC-340A as a form number.

<sup>13</sup> Prob. Code, § 2356.5.

## **Alternatives Considered**

The committee did not consider the alternative of taking no action because some elements of forms GC-340, and GC-350 need revisions to conform to existing law.

The committee considered keeping the requests for a general conservatorship and a limited conservatorship in one form. However, the feedback received from user-testing of the form and comments from the public led the committee to conclude that developing specific forms for limited conservatorships would reduce confusion and increase access to the courts, as well as assist courts in complying with the legal requirements to appoint conservators.

Finally, the committee considered whether to separate the information about any proposed joint conservator on an attachment (form GC-309C/GC-310C) rather than including the information on the main petition (forms GC-309 or GC-310). The committee concluded that a separate form would keep the main petition forms at a more reasonable length and reduce confusion by allowing the petitioner to specify more clearly and completely the identity of each person proposed for appointment as conservator.

## **Fiscal and Operational Impacts**

Courts would incur costs to train court employees, revise internal procedures, revise any local rules and forms, and update case management systems. However, the committee expects that the new forms will result in fewer continuances, which can reduce work for the courts, as an updated court investigator's report and advisement to the proposed conservatee could be required by late modifications to the petition.

### **Request for Specific Comments**

In addition to comments on the proposal as a whole, the advisory committee is interested in comments on the following:

- Does the proposal appropriately address the stated purpose?

The advisory committee also seeks comments from *courts* on the following cost and implementation matters:

- Would the proposal provide cost savings? If so, please quantify.
- What would the implementation requirements be for courts—for example, training staff (please identify position and expected hours of training), revising processes and procedures (please describe), changing docket codes in case management systems, or modifying case management systems?
- Would two months from Judicial Council approval of this proposal until its effective date provide sufficient time for implementation?
- How well would this proposal work in courts of different sizes?
- Would these new forms negatively impact courts that have adopted their own forms/attachments to address the need for multiple attachments to the current petition?

### **Attachments and Links**

1. Forms GC-309, GC-310, GC-309B/GC-310B, GC-309C/GC-310C, GC-339, GC-340, GC-339B/GC-340B, GC-339C/GC-340C, GC-350, GC-350A, at pages 9–45.
2. Link A: Assembly Bill 1663:  
[https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill\\_id=202120220AB1663](https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202120220AB1663)
3. Link B: Senate Bill 413:  
[https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill\\_id=201720180SB413](https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=201720180SB413)



CONSERVATORSHIP OF <i>(name):</i> _____ <div style="text-align: right; margin-top: 10px;">(PROPOSED) CONSERVATEE</div>	CASE NUMBER: _____
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1. d. Does this person reside in California?

- Yes
- No

e. Does this person reside in the county where this request is being filed?

- Yes
- No *(If no, check at least one of the options below to file your request in this county.)*

(1)  This person is not a resident but temporarily living in this county now *(explain):*

(2)  It would be in the best interests of this person to have this case in this county *(explain):*

(3)  This person owns property in this county *(for requests for estate only, you must complete form GC-309B/ GC-310B). (Describe property):*

**2. Developmental disability**

A developmental disability means a disability that:

- (1) Started before the person turned 18 years old;
- (2) Will continue with no known end; and
- (3) Causes a substantial handicap.

Does the person who needs help have a disability that meets the requirements listed above?

- No *(If no, do not use this form. For more information, go to [selfhelp.courts.ca.gov/helping-person-impairment-or-disability](http://selfhelp.courts.ca.gov/helping-person-impairment-or-disability).)*
- Yes *(If yes, complete a and b below.)*

a. Type of disability:

b. This disability limits the following daily activities of the person who needs help *(check all that apply):*

- Bathe, care for teeth, go to the bathroom
- Choose proper clothes and dress self
- Prepare meals, eat properly
- Protect self from harm
- Be able to contact help
- Take and manage medication
- Other:

*(You may use form GC-312 (Confidential Supplemental Information) to give more detailed reasons.)*



CONSERVATORSHIP OF <i>(name):</i> _____ <div style="text-align: right;">(PROPOSED) CONSERVATEE</div>	CASE NUMBER: _____
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**3. Other information about the person who needs help**

**a. Has anyone filed a court case to ask for decision-making power (conservatorship) over the person?**

- I don't know
- No
- Yes *(If yes, complete the section below.)*

Place *(state and county or tribe)*:

Case number:

Name of person appointed *(if any)*:

Date filed *(if known)*:

**b. Tribal member or lives on tribal lands** *(For information on federally recognized tribes, go to [www.usa.gov/tribes](http://www.usa.gov/tribes).)*

(1) Is the person a member of a federally recognized tribe?

- I don't know
- No
- Yes *(name of tribe and state tribe is located in):*

(2) Does the person live on tribal land *(owned by a federally recognized tribe)*?

- I don't know
- No
- Yes

(3) Does the person own property on tribal land?

- I don't know
- No
- Yes

**c. State hospital information**

Is the person a patient in or on a leave of absence from a state hospital controlled by the California Department of State Hospitals or the California Department of Developmental Services?

- I don't know
- No
- Yes *(name of institution):*

**d. Veteran's benefits**

The person *(check one)*:

- Does not receive veteran's benefits.
- Does not receive, but would qualify for veteran's benefits.
- Receives veteran's benefits *(amount of monthly benefits, if known):*
- I don't know.

**4. Information about you (petitioner)**

a. Name:

b. Address:

City:

State:

Zip code:

Telephone number:

Email address:

- c.  There is more than one petitioner. *(Attach a piece of paper and write "Additional Petitioners – Attachment 4c" at the top. Include the name, contact information, and relationship to the person who needs help for each additional petitioner. Each petitioner must sign at the bottom of this form.)*



CONSERVATORSHIP OF <i>(name):</i>  (PROPOSED) CONSERVATEE	CASE NUMBER:
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**5. Your relationship to the person who needs help**

I am *(check all that apply)*:

- a.  A relative. The person is my *(give relationship)*:
- b.  Married to the person and *(check one)*:
  - (1)  Not involved in any open family law case (divorce, annulment, legal separation).
  - (2)  Involved in an open family law case (divorce, annulment, legal separation) but this request is still in the best interest of the person because *(explain)*:
- c.  Currently in a domestic partnership with the person and not planning to terminate that domestic partnership.
- d.  Planning to terminate or already terminated domestic partnership with the person but this request is still in the best interest of the person because *(explain)*:
- e.  A bank or  another entity authorized to conduct the business of a trust company.
- f.  A nonprofit charitable corporation that meets the requirements of Probate Code section 2104.
- g.  A professional fiduciary (defined in Business and Professions Code section 6501(f)). My statement concerning licensure or exemption is provided in item 1 on page 1 of the attached form GC-210(A-PF)/GC-310(A-PF) *(Professional Fiduciary Attachment to Petition for Appointment of Guardian or Conservator)*.
- h.  A state or local public entity, officer, or employee *(explain)*:
- i.  Someone who has been chosen in writing (nominated) by one of the following *(check all that apply and attach the nomination)*:
  - (1)  An adult child, parent, or sibling of the person who needs help.
  - (2)  The spouse or domestic partner of the person.
  - (3)  The person.
- j.  Other *(explain)*:

**6. Financial relationship between you (petitioner) and the person who needs help**

I am *(check all that apply)*:

- a.  A creditor or an agent of a creditor of the person *(this means that the person owes money to you or someone you work for)*.
- b.  A debtor or an agent of a debtor of the person *(this means that you or someone you work for owes money to the person)*.
- c.  None of the above.



CONSERVATORSHIP OF <i>(name):</i>	CASE NUMBER:
(PROPOSED) CONSERVATEE	

**7. Request for conservatorship (items 7–9)**

I am asking the court to appoint the following person or persons as conservator of the person (person with decision-making powers over the person who needs help). *(Check a, b, c, or d)*

- a.  **Me, and no other person.**
- b.  **Me, and at least one other person.** *(If two or more people hold the same role, this is called a joint conservatorship. You **must** complete form GC-309C/GC-310C (Joint Conservator Attachment to Petition for Appointment of Probate Conservator) for each additional person and attach it to this form.)*
- c.  **One or more persons that are not me.**

(1) Name:

Address:

City:

State:

Zip code:

Telephone number:

Email address:

The person is *(check all that apply)*:

- (a)  A relative. The person who needs help is their *(give relationship)*:
- (b)  Married to the person who needs help and *(check one)*:
  - (i)  Not involved in any open family law cases (divorce, annulment, legal separation).
  - (ii)  Involved in an open family law case (divorce, annulment, legal separation) but this request is still in the best interest of the person who needs help because *(explain)*:
- (c)  Currently in a domestic partnership with the person who needs help and not planning to terminate that domestic partnership.
- (d)  Planning to terminate or already terminated domestic partnership with the person who needs help but this request is still in the best interest of the person who needs help because *(explain)*:
- (e)  A bank or  another entity authorized to conduct business of a trust company.
- (f)  A nonprofit charitable corporation that meets the requirements of Probate Code section 2104.
- (g)  A professional fiduciary (defined in Business and Professions Code section 6501(1)). Their statement concerning licensure or exemption is provided in item 1 on page 1 of the attached form GC-210(A-PF)/GC-310(A-PF) *(Professional Fiduciary Attachment to Petition for Appointment of Guardian or Conservator)*.
- (h)  A state or local public entity, officer, or employee *(explain)*:
- (i)  Someone who has been chosen in writing (nominated) by one of the following *(check all that apply and attach the nomination)*:
  - (i)  The person who needs help.
  - (ii)  The spouse or domestic partner of the person who needs help.
  - (iii)  The adult child, parent, or sibling of the person who needs help.
- (j)  Other *(explain)*:
- (2)  Check this box if you are listing another person. You must complete form GC-309C/GC-310C for each additional person and attach it to this form. *If two or more people hold the same role, this is called a joint conservatorship.*
- d.  **None of the above, I am requesting a conservatorship of the estate only.** *(You **must** complete form GC-309B/GC-310B (Estate Attachment to Request for Appointment of Probate Conservator) and attach it to this form.)*



CONSERVATORSHIP OF (name):	(PROPOSED) CONSERVATEE	CASE NUMBER:
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**8. Powers you are requesting for the proposed conservator**

*(For each category listed below, you can request no power, shared power, or full power. If you are requesting some or full power, explain why it is needed. Shared power gives the conservator power equal to the person who needs help, but the person who needs help can still make choices without the consent of the conservator or may override the choice of the conservator. If the conservator has full power, then the choice can be made by the conservator alone, whether or not the person who needs help agrees.)*

**a. Medical**

Power to make medical decisions for the person who needs help *(check one)*:

- No  
 Yes, shared power with the person who needs help  
 Yes, full power for the proposed conservator, no power to the person who needs help

*(If yes, complete 1–3 below)*

(1) Can the person make medical decisions on their own?

- No *(If no, you must have form GC-335 (Capacity Declaration) completed and filed before the court hearing.)*  
 Yes

(2) Does the person belong to a religion that relies on prayer alone for healing?

- No  
 Yes

(3) Explain why the power is needed:

**b. Residence**

Power to decide where the person who needs help lives *(check one)*:

- No  
 Yes, shared power with the person  
 Yes, full power for the proposed conservator, no power to the person

*(If yes, explain why the power is needed.)*

**c. Access to confidential papers**

Power to access confidential records and papers of the person who needs help *(check one)*:

- No  
 Yes, shared power with the person  
 Yes, full power for the proposed conservator, no power to the person

*(If yes, explain why the power is needed.)*



CONSERVATORSHIP OF <i>(name):</i>  (PROPOSED) CONSERVATEE	CASE NUMBER:
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8. d. **Marriage and domestic partnership**

Power to decide whether or not the person who needs help can get married or enter into a domestic partnership (*check one*):

- No  
 Yes, shared power with the person  
 Yes, full power for the proposed conservator, no power to the person

*(If yes, explain why the power is needed.)*

e. **Contacts and relationships**

Power to control the social and sexual contacts and relationships of the person who needs help (*check one*):

- No  
 Yes, shared power with the person  
 Yes, full power for the proposed conservator, no power to the person

*(If yes, explain why the power is needed.)*

f. **Education**

Power to make education decisions for the person who needs help (*check one*):

- No  
 Yes, shared power with the person  
 Yes, full power for the proposed conservator, no power to the person

*(If yes, explain why the power is needed.)*

g. **Contracts**

Do you want the court to take away the power of the person who needs help to enter into contracts?

- No  
 Yes

*(If yes, explain why the power is needed.)*

h. **Do you want the power to make financial decisions for the estate of the person who needs help?**

- Does not apply. The person does not have an estate.  
 No  
 Yes *(If yes, you must complete and attach form GC-309B/GC-310B (Estate Attachment to Petition for Appointment of Probate Conservator).)*



CONSERVATORSHIP OF <i>(name):</i>  (PROPOSED) CONSERVATEE	CASE NUMBER:
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8. i. **Special powers regarding major neurocognitive disorders**

Is the person who needs help going to be treated for a major neurocognitive disorder (such as dementia)?

- No
- Yes *(If yes, you must complete and attach form GC-313 (Attachment Requesting Special Orders Regarding a Major Neurocognitive Disorder).)*

j. **Other power you are requesting, if any** *(Describe the power you are requesting and why the power is needed.):*

9. **Reasons for your request**

*(Explain why the person who needs help is unable to properly provide for their personal needs for physical health, food, clothing, or shelter. Give general reasons here, give detailed reasons on form GC-312 (Confidential Supplemental Information). If you are requesting the estate only, you may skip this item.)*

10. **Attending the court hearing**

*(Once you file your request, the court will set a hearing date. You, the petitioner, will need to attend the hearing, and generally the person who needs help must attend.)*

Is the person who needs help able to attend the hearing?

- Yes
- No, because *(check all that apply):*
- a.  They are medically unable to attend the hearing. You **must** file a completed form GC-325 *(Confidential Declaration on Medical Ability to Attend Hearing—Probate Conservatorship)* before the hearing.
- b.  They will not be in the state of California.
- c.  They are not willing to attend the hearing, do not wish to object, and do not prefer another person be appointed.



CONSERVATORSHIP OF <i>(name):</i> _____ <div style="text-align: right;">(PROPOSED) CONSERVATEE</div>	CASE NUMBER: _____
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**11. Does the person who needs help have a preference about who should be the person making decisions on their behalf?**

*(Preferences may be expressed in spoken words or by any form of communication that does not involve talking (for example, writing, sign language or gestures, augmented communication, and facial expressions). If the person is able to form a preference, you must try to figure out that preference and tell the court.)*

- a.  Yes, the person prefers the conservator to be *(name)*:  
I know this because: \_\_\_\_\_
  
- b.  No, because they are medically unable to express a preference *(explain)*: \_\_\_\_\_
  
- c.  I don't know their preference, and I am not able to find out their preference because *(explain)*: \_\_\_\_\_

**12. Relatives of the person who needs help**

a. List the relatives of the person (spouse, parents, children, siblings, grandparents, and grandchildren). If the relative is no longer living, check the box for deceased.

	Name and relationship to person	Address <i>(number, street, city, state, and zip code)</i>
(1)	_____ Relationship: _____ <input type="checkbox"/> Deceased	
(2)	_____ Relationship: _____ <input type="checkbox"/> Deceased	
(3)	_____ Relationship: _____ <input type="checkbox"/> Deceased	
(4)	_____ Relationship: _____ <input type="checkbox"/> Deceased	
(5)	_____ Relationship: _____ <input type="checkbox"/> Deceased	
(6)	_____ Relationship: _____ <input type="checkbox"/> Deceased	
(7)	_____ Relationship: _____ <input type="checkbox"/> Deceased	
(8)	_____ Relationship: _____ <input type="checkbox"/> Deceased	

Check here if there are additional relatives. List them on a separate sheet of paper, write "Attachment 12a" at the top, and attach it to this form. *(List the name, mailing address, and relationship of each person.)*



CONSERVATORSHIP OF <i>(name):</i> _____ <div style="text-align: right;">(PROPOSED) CONSERVATEE</div>	CASE NUMBER: _____
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12. b. If the person has no living relatives listed in item 12a, list their stepparents, stepchildren, aunts and uncles, and nieces and nephews. If the person has no living aunts or uncles, list their cousins. If the relative is no longer living, check the box for deceased.

	Name and relationship to person	Address <i>(number, street, city, state, and zip code)</i>
(1)	_____ Relationship: _____ <input type="checkbox"/> Deceased	
(2)	_____ Relationship: _____ <input type="checkbox"/> Deceased	
(3)	_____ Relationship: _____ <input type="checkbox"/> Deceased	

Check here if there are additional relatives. List them on a separate sheet of paper, write "Attachment 12b" at the top, and attach it to this form. *(List the name, mailing address, and relationship of each person.)*

c.  The person has no living relatives. *(If this box is checked, you must try hard to find living relatives and have reasons if you cannot find them.)*

Explain what you did to look for living relatives and why you cannot find them:

13. Number of pages attached *(if any)*: \_\_\_\_\_

Date:

\_\_\_\_\_  
 Type or Print Name of Lawyer for Petitioner



\_\_\_\_\_  
 Signature of Lawyer for Petitioner

*(If there is more than one petitioner, the other petitioners must also sign below.)*

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

\_\_\_\_\_  
 Type or Print Name of Each Petitioner



\_\_\_\_\_  
 Signature of Each Petitioner

Date:

\_\_\_\_\_  
 Type or Print Name of Each Petitioner



\_\_\_\_\_  
 Signature of Each Petitioner

Date:

\_\_\_\_\_  
 Type or Print Name of Each Petitioner



\_\_\_\_\_  
 Signature of Each Petitioner

Check here if there are additional petitioners.

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NUMBER:  NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: EMAIL ADDRESS: ATTORNEY FOR (name):	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
CONSERVATORSHIP OF (name):  (PROPOSED) CONSERVATEE	
<b>REQUEST FOR APPOINTMENT OF PROBATE CONSERVATOR</b> <b>(Petition for Appointment)</b>  <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE <input type="checkbox"/> <b>JOINT CONSERVATOR</b> <input type="checkbox"/> <b>SUCCESSOR</b>	CASE NUMBER:  HEARING DATE:
<p><b>When to use this form:</b> Use this form to ask the court for decision-making powers over a person with a disability or impairment. This request can also include the power to make decisions about the person's estate (a person has an estate if they have assets or income other than public benefits).</p> <p><b>Do not</b> use this form if the person's handicap is only physical, only psychiatric, or only due to learning disabilities. For more information, go to <a href="https://selfhelp.courts.ca.gov/helping-person-impairment-or-disability">selfhelp.courts.ca.gov/helping-person-impairment-or-disability</a>.</p> <p><b>Do not</b> use this form if the person who needs help is an adult with a developmental disability and has not been diagnosed with a neurocognitive disorder (such as dementia). For more information, go to <a href="https://selfhelp.courts.ca.gov/limited-conservatorships">selfhelp.courts.ca.gov/limited-conservatorships</a>.</p>	

1. **Person who needs help making their own decisions (proposed conservatee)**

a. Name:

b. Address:

City: State: Zip code:

Telephone number: Email address:

c. How old is this person (check one):

- (1)  At least 18 years old.
- (2)  Will be 18 years old within 1 year.
- (3)  Is under 18 years old and married or divorced.

(Note: If you cannot check any of the boxes above, do not use this form.)



CONSERVATORSHIP OF <i>(name):</i>  (PROPOSED) CONSERVATEE	CASE NUMBER:
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1. d. Does this person reside in California?

Yes

No

e. Does this person reside in the county where this request is being filed?

Yes

No *(If no, check at least one of the options below to file your request in this county.)*

(1)  This person is not a resident but temporarily living in this county now *(explain):*

(2)  It would be in the best interests of this person to have this case in this county *(explain):*

(3)  This person owns property in this county *(for requests for estate only, you must complete form GC-309B/ GC-310B). (Describe property):*

2. **Other information about the person who needs help**

a. **Has anyone filed a court case to ask for decision-making power (conservatorship) over the person?**

I don't know

No

Yes *(If yes, complete the section below.)*

Place *(state and county or tribe):*

Case number:

Name of person appointed *(if any):*

Date filed *(if known):*

b. **Tribal member or lives on tribal lands** *(For information on federally recognized tribes, go to [www.usa.gov/tribes](http://www.usa.gov/tribes).)*

(1) Is the person a member of a federally recognized tribe?

I don't know

No

Yes *(name of tribe and state tribe is located in):*

(2) Does the person live on tribal land *(owned by a federally recognized tribe)?*

I don't know

No

Yes

(3) Does the person own property on tribal land?

I don't know

No

Yes



CONSERVATORSHIP OF <i>(name):</i> _____ <div style="text-align: right; margin-top: 10px;">(PROPOSED) CONSERVATEE</div>	CASE NUMBER: _____
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**2. c. State hospital information**

Is the person a patient in or on a leave of absence from a state hospital controlled by the California Department of State Hospitals or the California Department of Developmental Services?

- I don't know
- No
- Yes *(name of institution):* \_\_\_\_\_

**d. Veteran's benefits**

The person *(check one)*:

- Does not receive veteran's benefits.
- Does not receive, but would qualify for veteran's benefits.
- Receives veteran's benefits *(amount of monthly benefits, if known):* \_\_\_\_\_
- I don't know.

**3. Information about you (petitioner)**

a. Name:

b. Address:

City:

State:

Zip code:

Telephone number:

Email address:

- c.  There is more than one petitioner. *(Attach a piece of paper and write "Additional Petitioners – Attachment 3c" at the top. Include the name, information, and relationship to the person who needs help for each additional petitioner. Each petitioner must sign at the bottom of this form.)*

**4. Your relationship to the person who needs help**

I am *(check all that apply)*:

- a.  A relative. The person is my *(give relationship)*: \_\_\_\_\_
- b.  Married to the person and *(check one)*:
  - (1)  Not involved in any open family law case (divorce, annulment, legal separation).
  - (2)  Involved in an open family law case (divorce, annulment, legal separation) but this request is still in the best interest of the person because *(explain)*: \_\_\_\_\_
- c.  Currently in a domestic partnership with the person and not planning to terminate that domestic partnership.
- d.  Planning to terminate or already terminated domestic partnership with the person but this request is still in the best interest of the person because *(explain)*: \_\_\_\_\_
- e.  A bank or  another entity authorized to conduct the business of a trust company.
- f.  A nonprofit charitable corporation that meets the requirements of Probate Code section 2104.
- g.  A professional fiduciary (defined in Business and Professions Code section 6501(f)). My statement concerning licensure or exemption is provided in item 1 on page 1 of the attached form GC-210(A-PF)/GC-310(A-PF) *(Professional Fiduciary Attachment to Petition for Appointment of Guardian or Conservator)*.



CONSERVATORSHIP OF <i>(name):</i> _____ <div style="text-align: right; margin-top: 5px;">(PROPOSED) CONSERVATEE</div>	CASE NUMBER: _____
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4. h.  A state or local public entity, officer, or employee (*explain*):
- i.  Someone who has been chosen in writing (nominated) by one of the following (*check all that apply and attach the nomination*):
- (1)  An adult child, parent, or sibling of the person who needs help.
  - (2)  The spouse or domestic partner of the person.
  - (3)  The person.
- j.  Other (*explain*):

**5. Financial relationship between you (petitioner) and the person who needs help**

I am (*check all that apply*):

- a.  A creditor or an agent of a creditor of the person (*this means that the person owes money to you or someone you work for*).
- b.  A debtor or an agent of a debtor of the person (*this means that you or someone you work for owes money to the person*).
- c.  None of the above.

**6. Request for conservatorship (items 6–8)**

I am asking the court to appoint the following person or persons as conservator of the person (person with decision-making powers over the person who needs help). (*Check a, b, c, or d*)

- a.  **Me, and no other person.**
- b.  **Me, and at least one other person.** (*If two or more people hold the same role, this is called a joint conservatorship. You must complete form GC-309C/GC-310C (Joint Conservator Attachment to Petition for Appointment of Probate Conservator) for each additional person and attach it to this form.*)
- c.  **One or more persons that are not me.**

(1) Name:

Address:

City:

State:

Zip code:

Telephone number:

Email address:

The person is (*check all that apply*):

- (a)  A relative. The person who needs help is their (*give relationship*):
- (b)  Married to the person who needs help and (*check one*):
  - (i)  Not involved in any open family law cases (divorce, annulment, legal separation).
  - (ii)  Involved in an open family law case (divorce, annulment, legal separation) but this request is still in the best interest of the person who needs help because (*explain*):
- (c)  Currently in a domestic partnership with the person who needs help and not planning to terminate that domestic partnership.
- (d)  Planning to terminate or already terminated domestic partnership with the person who needs help but this request is still in the best interest of the person who needs help because (*explain*):



CONSERVATORSHIP OF <i>(name):</i> _____ <div style="text-align: right; margin-top: 10px;">(PROPOSED) CONSERVATEE</div>	CASE NUMBER: _____
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6. c. (1) (e)  A bank or  another entity authorized to conduct business of a trust company.
- (f)  A nonprofit charitable corporation that meets the requirements of Probate Code section 2104.
- (g)  A professional fiduciary (defined in Business and Professions Code section 6501(1)). Their statement concerning licensure or exemption is provided in item 1 on page 1 of the attached form GC-210(A-PF)/GC-310(A-PF) (*Professional Fiduciary Attachment to Petition for Appointment of Guardian or Conservator*).
- (h)  A state or local public entity, officer, or employee (*explain*):
- (i)  Someone who has been chosen in writing (nominated) by one of the following (*check all that apply and attach the nomination*):
- (i)  The person who needs help.
- (ii)  The spouse or domestic partner of the person who needs help.
- (iii)  The adult child, parent, or sibling of the person who needs help.
- (j)  Other (*explain*):
- (2)  Check this box if you are listing another person. You must complete form GC-309C/GC-310C for each additional person and attach it to this form. *If two or more people hold the same role, this is called a joint conservatorship.*
- d.  **None of the above, I am requesting a conservatorship of the estate only.** (*You must complete form GC-309B/GC-310B (Estate Attachment to Request for Appointment of Probate Conservator) and attach it to this form.*)

**7. Powers you are requesting for the proposed conservator**

*(Check the boxes for the powers that you are requesting and explain why it is needed.)*

- a. Power to make medical decisions for the person who needs help.
- No
- Yes (*if yes, complete 1-4 below*)
- (1) Can the person make medical decisions on their own?
- No (*If no, you must have form GC-335 (Capacity Declaration) completed and filed before the court hearing.*)
- Yes
- (2) Does the person belong to a religion that relies on prayer alone for healing?
- No
- Yes
- (3) Is the person going to be treated for a major neurocognitive disorder (example: dementia)?
- No
- Yes (*If yes, you must complete and attach form GC-313 (Attachment Requesting Special Orders Regarding a Major Neurocognitive Disorder).*)
- (4) Explain why the power is needed:



CONSERVATORSHIP OF (name):  (PROPOSED) CONSERVATEE	CASE NUMBER:
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## 7. b. Other powers

Other power you are requesting, if any. *(Describe the power you are requesting and why the power is needed.)*:

## c. Estate

Power to make financial decisions for the person, also known as a "conservatorship of the estate".

No

Yes *(If yes, you must complete and attach form GC-309B/GC-310B (Estate Attachment to Petition for Appointment of Probate Conservator).)*

## 8. Reasons for your request

*(Explain why the person who needs help is unable to properly provide for their personal needs for physical health, food, clothing, or shelter. Give general reasons here, give detailed reasons on form GC-312 (Confidential Supplemental Information). If you are requesting the estate only, you may skip this item.)*

## 9. Attending the court hearing

*(Once you file your request, the court will set a hearing date. You, the petitioner, will need to attend the hearing, and generally the person who needs help must attend.)*

Is the person who needs help able to attend the hearing?

Yes

No, because *(check all that apply)*:

- a.  They are medically unable to attend the hearing. You **must** file a completed form GC-325 (*Confidential Declaration on Medical Ability to Attend Hearing–Probate Conservatorship*) before the hearing.
- b.  They will not be in the state of California.
- c.  They are not willing to attend the hearing, do not wish to object, and do not prefer another person be appointed.



CONSERVATORSHIP OF <i>(name):</i> _____ <div style="text-align: right;">(PROPOSED) CONSERVATEE</div>	CASE NUMBER: _____
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**10. Does the person who needs help have a preference about who should be the person making decisions on their behalf?**

*(Preferences may be expressed in spoken words or by any form of communication that does not involve talking (for example, writing, sign language or gestures, augmented communication, and facial expressions). If the person is able to form a preference, you must try to figure out that preference and tell the court.)*

- a.  Yes, the person prefers the conservator to be *(name)*:  
I know this because: \_\_\_\_\_
  
- b.  No, because they are medically unable to express a preference *(explain)*: \_\_\_\_\_
  
- c.  I don't know their preference, and I am not able to find out their preference because *(explain)*: \_\_\_\_\_

**11. Relatives of the person who needs help**

a. List the relatives of the person (spouse, parents, children, siblings, grandparents, or grandchildren). If the relative is no longer living, check the box for deceased.

	<u>Name and relationship to person</u>	<u>Address (number, street, city, state, and zip code)</u>
(1)	<input style="width:95%;" type="text"/> Relationship: <input style="width:95%;" type="text"/> <input type="checkbox"/> Deceased	<input style="width:100%; height:30px;" type="text"/>
(2)	<input style="width:95%;" type="text"/> Relationship: <input style="width:95%;" type="text"/> <input type="checkbox"/> Deceased	<input style="width:100%; height:30px;" type="text"/>
(3)	<input style="width:95%;" type="text"/> Relationship: <input style="width:95%;" type="text"/> <input type="checkbox"/> Deceased	<input style="width:100%; height:30px;" type="text"/>
(4)	<input style="width:95%;" type="text"/> Relationship: <input style="width:95%;" type="text"/> <input type="checkbox"/> Deceased	<input style="width:100%; height:30px;" type="text"/>
(5)	<input style="width:95%;" type="text"/> Relationship: <input style="width:95%;" type="text"/> <input type="checkbox"/> Deceased	<input style="width:100%; height:30px;" type="text"/>
(6)	<input style="width:95%;" type="text"/> Relationship: <input style="width:95%;" type="text"/> <input type="checkbox"/> Deceased	<input style="width:100%; height:30px;" type="text"/>
(7)	<input style="width:95%;" type="text"/> Relationship: <input style="width:95%;" type="text"/> <input type="checkbox"/> Deceased	<input style="width:100%; height:30px;" type="text"/>
(8)	<input style="width:95%;" type="text"/> Relationship: <input style="width:95%;" type="text"/> <input type="checkbox"/> Deceased	<input style="width:100%; height:30px;" type="text"/>

Check here if there are additional relatives. List them on a separate sheet of paper, write "Attachment 11a" at the top, and attach it to this form. *(List the name, mailing address, and relationship of each person.)*



CONSERVATORSHIP OF <i>(name):</i> _____ <div style="text-align: right;">(PROPOSED) CONSERVATEE</div>	CASE NUMBER: _____
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11. b. If the person has no living relatives listed in item 11a, list their stepparents, stepchildren, aunts and uncles, and nieces and nephews. If the person has no living aunts or uncles, list their cousins. If the relative is no longer living, check the box for deceased.

	Name and relationship to person	Address ( <i>number, street, city, state, and zip code</i> )
(1)	_____ Relationship: _____ <input type="checkbox"/> Deceased	
(2)	_____ Relationship: _____ <input type="checkbox"/> Deceased	
(3)	_____ Relationship: _____ <input type="checkbox"/> Deceased	
(4)	_____ Relationship: _____ <input type="checkbox"/> Deceased	

Check here if there are additional relatives. List them on a separate sheet of paper, write "Attachment 11b" at the top, and attach it to this form. (*List the name, mailing address, and relationship of each person.*)

c.  The person has no living relatives. (*If this box is checked, you must try hard to find living relatives and have reasons if you cannot find them.*)

Explain what you did to look for living relatives and why you cannot find them:

12. Number of pages attached (*if any*): \_\_\_\_\_

Date:

_____ Type or Print Name of Lawyer for Petitioner	▶	_____ Signature of Lawyer for Petitioner
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*(If there is more than one petitioner, the other petitioners must also sign below.)*

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

_____ Type or Print Name of Each Petitioner	▶	_____ Signature of Each Petitioner
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Date:

_____ Type or Print Name of Each Petitioner	▶	_____ Signature of Each Petitioner
--	---	---------------------------------------

Date:

_____ Type or Print Name of Each Petitioner	▶	_____ Signature of Each Petitioner
--	---	---------------------------------------

Check here if there are additional petitioners.

CONSERVATORSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (name): <span style="float: right;"><input type="checkbox"/> CONSERVATEE <input type="checkbox"/> PROPOSED CONSERVATEE</span>	CASE NUMBER:
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**ESTATE ATTACHMENT TO REQUEST FOR APPOINTMENT OF PROBATE  
CONSERVATOR**

**Instructions:** Complete this form and attach it to form GC-309 or form GC-310 to ask the court for decision-making power over the estate of a person with a disability or impairment. The person has an “estate” if they have assets or income other than public benefits.

**1. Person who needs help making their own decisions (must be the same as item 1a on form GC-309 or form GC-310)**

Name:

**2. Information about the estate (finances) of the person who needs help**

- a. Estimated value of the personal property (*personal property is anything other than land, houses, or other buildings, and includes bank accounts, personal possessions, and investments*): \$
- b. Annual gross income from:
  - (1) Real property (land, houses, buildings, including rental income): \$
  - (2) Personal property (examples: investment or retirement accounts): \$
  - (3) Pensions: \$
  - (4) Wages: \$
  - (5) Public assistance benefits: \$
  - (6) Other: \$
- c. Total value of 2a and 2b: \$ \_\_\_\_\_
- d. Estimated value of real property (land, houses, or other buildings): \$

**3. Request for conservatorship of the estate (items 3–6)**

I am asking the court to appoint the following person or persons as conservator of the estate (person with decision-making power over the finances of the person who needs help).

- a.  The same person who is requested to help with health care (the proposed conservator named in item 7 of form GC-309 or item 6 of form GC-310).
- b.  The following person (*write who you want the court to appoint to help with finances below*):

Name:

Address:

City:

State:

Zip code:

Telephone number:

Email address:

The person is (*check all that apply*):

- (1)  A relative of the person who needs help (*specify*):
- (2)  Married to the person who needs help on form GC-309 or form GC-310 and (*check one*):
  - (a)  Not involved in any open family law cases (divorce, annulment, legal separation).
  - (b)  Involved in an open family law case (divorce, annulment, legal separation) but this request is still in the best interests of the person who needs help because (*explain*):



CONSERVATORSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (name):	CASE NUMBER:
<input type="checkbox"/> CONSERVATEE <input type="checkbox"/> PROPOSED CONSERVATEE	

3. b. (3)  Currently in a domestic partnership with the person who needs help on form GC-309 or form GC-310 and not planning to terminate that domestic partnership; or
- (4)  Planning to terminate or already terminated domestic partnership with the person who needs help on form GC-309 or form GC-310 but this request is still in the best interest of the person who needs help because *(explain)*:
- (5)  A bank or  another entity authorized to conduct business of a trust company
- (6)  A nonprofit charitable corporation that meets the requirements of Probate Code section 2104
- (7)  A professional fiduciary (defined in Business and Professions Code section 6501(f)). Their statement concerning licensure or exemption is provided in item 1 on page 1 of the attached form GC-210(A-PF)/GC-310(A-PF) (*Professional Fiduciary Attachment to Petition for Appointment of Guardian or Conservator*).
- (8)  A state or local public entity, officer, or employee *(explain)*:
- (9)  Someone who has already been chosen in writing (nominated) by one of the following *(check one and attach the nomination)*:
- (i)  The person who needs help on form GC-309 or form GC-310 ((proposed) conservatee)
- (ii)  Their spouse or domestic partner, or
- (iii)  Their close relative (a close relative is an adult child, parent, or sibling).
- (10)  Other *(explain)*:
- c.  More than one person. *(You must complete form GC-309C/GC-310C for each additional person and attach it to this form. If two or more people hold the same role, this is called a joint conservatorship.)*

4. **Powers you are requesting for the conservator if the person who needs help has a developmental disability.**

*(If the person who needs help has a developmental disability, the court will identify the decisions and assets that you have the power to manage and control. Check all the powers you are requesting and explain.)*

- a.  Control over property
- (1) Describe property:
- (2) *(Explain why the power is needed.)*
- b.  Control over debts, wages, rentals, or other claims
- (1) Describe property and claims:
- (2) *(Explain why the power is needed.)*
- c.  Contracts or debts that you may make on behalf of the person who needs help
- (1) Describe contracts or debts:
- (2) *(Explain why the power is needed.)*



CONSERVATORSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (name):	CASE NUMBER:
<input type="checkbox"/> CONSERVATEE <input type="checkbox"/> PROPOSED CONSERVATEE	

4. d.  Claims against the person who needs help that you may pay, settle, or defend

(1) Describe claims:

(2) *(Explain why the power is needed.)*

#### 5. Additional Powers

*(In special circumstances, the court will allow the conservator to take certain actions without asking the court for permission each time. If you believe that it would assist the person who needs help for the conservator to be granted independent powers, please explain the powers you are requesting.)*

a. I am requesting the court to grant these additional powers *(describe each additional power)*:

b. Explain why these powers would assist the person who needs help. *(For the court to make these orders, you must prove that the powers you are requesting in item 5a above are in the best interests of the person who needs help.)*

#### 6. Reasons for Request

Explain why the person who needs help is greatly unable to manage their finances or cannot avoid being tricked or pressured into making financial choices that are not good for them (fraud or undue influence). Give general reasons here, give detailed response on form GC-312 *(Confidential Supplemental Information)*.

#### 7. Bond

*(A bond is like an insurance policy to protect the person who needs help. The court usually requires the person managing the finances to get this bond. It must come from an approved company or follow legal guidelines. The standard amount for the bond is calculated by the court based on the property and income of the estate as stated in item 2c plus a recovery amount. However, you can also request a different amount.)*

I am requesting:

a.  The standard amount for bond

b.  The amount to be set at: \$ \_\_\_\_\_ because:

(1)  \$ \_\_\_\_\_ will be deposited in a blocked account at *(name and address of banking institution)*:

After the deposit, you must file form MC-356 *(Acknowledgment of Order and Receipts of Blocked Account)*.

(2)  Other *(explain why this is the right amount)*:

c.  No bond because the person to be appointed is a corporate fiduciary or an exempt government agency.

CONSERVATORSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (name):	CASE NUMBER:
<input type="checkbox"/> CONSERVATEE <input type="checkbox"/> PROPOSED CONSERVATEE	

**JOINT CONSERVATOR ATTACHMENT TO REQUEST FOR APPOINTMENT  
OF PROBATE CONSERVATOR**

**Instructions:** Only use this form if you are requesting more than one person be granted the same decision-making powers over the person who needs help (the person in item 1a on form GC-309 or form GC-310). When there is more than one person appointed to the same role, they both must agree on the decisions to be made. If more than two persons are appointed to the same role, the majority must agree on the decisions. If you are requesting more than one person be appointed to the same role, complete this form for each person and attach it to form GC-309 or form GC-310. Before filing this petition, you should make sure that having more than one conservator is best for the person who needs help.

**1. Person who needs help (must be the same person as item 1a on form GC-309 or form GC-310)**

Name:

**2. Information about the proposed joint conservator**

a. Name:

b. Address:

City:

State:

Zip code:

c. Telephone number:

Email address (optional):

d. Is the proposed joint conservator a co-petitioner (an additional person who has completed and signed all the forms needed to request the conservatorship)?

Yes

No (If no, the proposed joint conservator will need to sign the consent at section 5 and complete and file form GC-314 (Confidential Conservator Screening Form).)

**3. Relationship of proposed joint conservator to person who needs help (proposed conservatee)**

The person is (check all that apply):

a.  A relative of the person who needs help. (Specify):

b.  Married to the person who needs help and (check one):

(1)  Not involved in any open family law cases (divorce, annulment, legal separation).

(2)  Involved in an open family law case (divorce, annulment, legal separation) but this request is still in the best interests of the person who needs help because (explain):

c.  Currently in a domestic partnership with the person who needs help and not planning to terminate that domestic partnership.

d.  Planning to terminate or already terminated domestic partnership with the person who needs help but this request is still in the best interest of the person who needs help because (explain):

e.  A bank or  another entity authorized to conduct business of a trust company.

f.  A nonprofit charitable corporation that meets the requirements of Probate Code section 2104.



CONSERVATORSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (name): <span style="float: right;"><input type="checkbox"/> CONSERVATEE <input type="checkbox"/> PROPOSED CONSERVATEE</span>	CASE NUMBER:
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3. g.  A professional fiduciary (defined in Business and Professions Code section 6501(f)). Their statement concerning licensure or exemption is provided in item 1 on page 1 of the attached form GC-210(A-PF)/GC-310(A-PF) (*Professional Fiduciary Attachment to Petition for Appointment of Guardian or Conservator*).
- h.  A state or local public entity, officer, or employee (*explain*):
- i.  Someone who has already been chosen in writing (nominated) by one of the following (*check one and attach the nomination*):
- (1)  The person who needs help ((proposed) conservatee),
  - (2)  Their spouse or domestic partner, or
  - (3)  Their close relative (a close relative is an adult child, parent, or sibling).
- j.  Other (*explain*):

**4. Your request**

I am requesting the court appoint the person in item 2 as:

- a.  Joint conservator of the person (person with joint decision-making power over the health care of the person who needs help).
- b.  Joint conservator of the estate (person with joint decision-making power over the finances of the person who needs help).
- c. Explain why having more than one conservator would help the person who needs help:

**5. Consent of Joint Conservator**

*(If the person listed in item 2 is not a petitioner, they must complete and sign the consent to serve below.)*

I consent to serve as joint conservator of the  person  estate

Date:

\_\_\_\_\_

Type or Print Name

▶ \_\_\_\_\_

Signature of Proposed Joint Conservator

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NUMBER:  NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: EMAIL ADDRESS: ATTORNEY FOR (name):	FOR COURT USE ONLY   <b>DRAFT</b> <b>Not approved by</b> <b>the Judicial Council</b> <b>GC-339 2026-03-24</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
CONSERVATORSHIP OF (name):  (PROPOSED) CONSERVATEE	
<b>ORDER APPOINTING LIMITED PROBATE CONSERVATOR</b> <input type="checkbox"/> <b>JOINT CONSERVATOR</b> OF THE <input type="checkbox"/> <b>PERSON</b> <input type="checkbox"/> <b>ESTATE</b>	CASE NUMBER:
<b>WARNING: THIS APPOINTMENT IS NOT EFFECTIVE UNTIL LETTERS HAVE ISSUED.</b>	

1. The request came on for hearing as follows:

- a. Judicial officer (name):
- b. Hearing date: \_\_\_\_\_ Time: \_\_\_\_\_ Department: \_\_\_\_\_
- c. The request was for the appointment of a limited  conservator.  joint conservator.
- d. Petitioner (name): \_\_\_\_\_  attended the hearing.  did not attend the hearing.
- e. Attorney for petitioner (name): \_\_\_\_\_  attended the hearing.  did not attend the hearing.
- f. Attorney for person who needs help:  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
  
 attended the hearing.  did not attend the hearing.
- g. Person who needs help  attended the hearing.  did not attend the hearing (give reason, if known, including whether they were out of state): \_\_\_\_\_
- Additional information is listed on an attachment (include additional petitioners, attorneys, or other persons who made an appearance).

**THE COURT FINDS AND ORDERS:**

2. Notice (check either a or b):

- a.  All notices have been given as required by law.
- b.  All other notices have been given by law and notice to the following people has been ordered waived:  
 Name and relationship: \_\_\_\_\_

3. The person who needs help (conservatee) (name):

(check all that apply):

- a.  Is developmentally disabled as defined in Probate Code section 1420.
- b.  Cannot communicate, with or without reasonable accommodations, a desire to participate in the voting process and is disqualified from voting.
- c.  Is an adult.
- d.  Will be an adult on the effective date of this order.
- e.  Is a married minor.
- f.  Is a minor whose marriage has been dissolved.



CONSERVATORSHIP OF <i>(name):</i>  (PROPOSED) CONSERVATEE	CASE NUMBER:
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4.  The appointed court investigator is *(name)*:  
 Address, telephone number, and email address:

5. Conservator of the Person

a. Reason for appointment *(check one)*:

- (1)  The person who needs help is unable to provide for their personal needs for physical health, food, clothing, or shelter and granting a limited conservatorship of the PERSON is the least restrictive alternative needed for their protection.
- (2)  The person who needs help has voluntarily requested appointment of a conservator and good cause has been shown for appointment.

b. Person appointed

- (1) The court appoints *(name and address)*:

as limited  conservator  joint conservator of the PERSON of  
*(name of person who needs help):* and *Letters of Conservatorship* will issue upon qualification.

- (2)  Additional persons appointed limited conservator of the PERSON are named on attached form GC-339C (*Additional Orders Regarding Joint Conservators*).

c. The conservator or joint conservator *(check all that apply)*:

- (1)  Is a professional fiduciary as defined by Business and Professions Code section 6501(f).
- (2)  Holds a valid, unexpired, unsuspended license as a professional fiduciary issued by the Professional Fiduciaries Bureau of the California Department of Consumer Affairs under chapter 6 (commencing with section 6500) of division 3 of the Business and Professions Code.

License no.:

Issuance or last renewal date:

Expiration date:

d. The conservator or joint conservator is *(check either 1, 2, or 3)*:

- (1)  Not married to the person who needs help.
- (2)  Married to the person who needs help but not involved in any open family law case (divorce, annulment, legal separation).
- (3)  Married to the person who needs help and involved in an open family law case (divorce, annulment, legal separation) but it is in the best interests of the person who needs help to appoint the spouse as  conservator.  
 joint conservator.

e. The conservator or joint conservator is *(check either 1, 2, or 3)*:

- (1)  Not currently in a domestic partnership with the person who needs help.
- (2)  The domestic partner of the person who needs help and has neither terminated nor is planning to terminate that domestic partnership.
- (3)  The domestic partner of the person who needs help and is planning to terminate or already terminated the domestic partnership, but it is in the best interests of the person who needs help to appoint the partner or former domestic partner as  conservator.  joint conservator.

6. Conservator of the Estate

a. Reason for appointment *(check one)*:

- (1)  The person who needs help is substantially unable to manage their own financial resources, or to resist fraud or undue influence and granting a limited conservatorship of the ESTATE is the least restrictive alternative needed for their protection.
- (2)  The person who needs help has voluntarily requested appointment of a conservator and good cause has been shown for appointment.





CONSERVATORSHIP OF <i>(name):</i> _____ <div style="text-align: right;">(PROPOSED) CONSERVATEE</div>	CASE NUMBER: _____
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10. Marriage and domestic partnership

- a.  The conservator or joint conservator of the person is granted the authority to grant or withhold consent to the marriage of, or the entrance into a domestic partnership by, the conservatee. This power is shared with the conservatee.
- b.  The conservatee may not consent to marry or enter into a domestic partnership; the conservator has full power.

11. Contacts and relationships

- a.  The conservator or joint conservator of the person is granted the authority to control the social and sexual contacts and relationships of the conservatee. This power is shared with the conservatee.
- b.  The conservatee may not control their own social and sexual contacts; the conservator has full power.

12. Education

- a.  The conservator or joint conservator of the person is granted the authority to make educational decisions about the conservatee. This power is shared with the conservatee.
- b.  The conservatee may not make their own educational decisions; the conservator has full power.

13. Contracts

- The conservatee may not enter into legal contracts.

14. Estate

- Orders relating to the powers and duties of the conservator or joint conservator of the estate as specified in form GC-339B/GC-340B are granted.

15. Special powers regarding major neurocognitive disorders

- The person who needs help (conservatee) has a major neurocognitive disorder as defined in Probate Code section 2356.5 and the court finds all other facts required to make the orders regarding placement or administration of medications. The conservator or joint conservator of the person is granted the authority:
  - a.  To place the conservatee in a locked care facility described in Probate Code section 2356.5(b).
  - b.  To authorize administration of medications for the care and treatment of a major neurocognitive disorder described in Probate Code section 2356.5(c).

16.  Other orders as specified in an additional page that is attached to this order and labeled attachment 16 are granted.

17.  Attorney *(name):* \_\_\_\_\_ has been appointed by the court as legal counsel to represent the conservatee in these proceedings. The cost for representation is: \$ \_\_\_\_\_ . The conservatee has the ability to pay  all  none  a portion of this amount. *(specify):* \$ \_\_\_\_\_ .

18. This order is effective on the  date signed  the following date *(specify):* \_\_\_\_\_

19. Number of boxes checked in items 2–18: \_\_\_\_\_

20. Number of pages attached: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Judicial Officer

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NUMBER:  NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: EMAIL ADDRESS: ATTORNEY FOR (name):	FOR COURT USE ONLY   <b>DRAFT</b> <b>Not approved by</b> <b>the Judicial Council</b> <b>GC-340 2026-03-24</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
CONSERVATORSHIP OF (name): (PROPOSED) CONSERVATEE	
<b>ORDER APPOINTING</b> <input type="checkbox"/> <b>SUCCESSOR</b> <input type="checkbox"/> <b>JOINT</b> <b>PROBATE CONSERVATOR OF THE</b> <input type="checkbox"/> <b>PERSON</b> <input type="checkbox"/> <b>ESTATE</b>	CASE NUMBER:
<b>WARNING: THIS APPOINTMENT IS NOT EFFECTIVE UNTIL LETTERS HAVE ISSUED.</b>	

1. The request came on for hearing as follows:

- a. Judicial officer (name):
- b. Hearing date: \_\_\_\_\_ Time: \_\_\_\_\_ Department: \_\_\_\_\_
- c. The request was for the appointment of a  conservator.  **joint conservator**.  successor conservator.
- d. Petitioner (name):  attended the hearing.  did not attend the hearing.
- e. Attorney for petitioner (name):  attended the hearing.  did not attend the hearing.
- f. Attorney for person who needs help:  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
  
 attended the hearing.  did not attend the hearing.
- g. **Person who needs help**  attended the hearing.  did not attend the hearing (give reason, if known, including whether they were out of state): \_\_\_\_\_
- Additional information is listed on an attachment (include additional petitioners, attorneys, or other persons who made an appearance).

**THE COURT FINDS AND ORDERS:**

2. Notice (check either a or b):

- a.  All notices have been given as required by law.
- b.  All notice has been given as required by law, except notice to the following people has been ordered waived:  
 Name and relationship: \_\_\_\_\_

3. The person who needs help (conservatee) (name):

(check all that apply):

- a.  Is developmentally disabled as defined in Probate Code section 1420 and lacks the capacity to perform all of the tasks necessary to provide properly for their own personal needs for physical health, food, clothing, or shelter, or to manage their own financial resources.
- b.  Has voluntarily requested appointment of a conservator and good cause has been shown for appointment.
- c.  Cannot communicate, with or without reasonable accommodations, a desire to participate in the voting process and is disqualified from voting.
- d.  Is an adult.



CONSERVATORSHIP OF <i>(name):</i> _____ <div style="text-align: right;">(PROPOSED) CONSERVATEE</div>	CASE NUMBER: _____
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- 3. e.  Will be an adult on the effective date of this order.
- f.  Is a married minor.
- g.  Is a minor whose marriage has been dissolved.

4.  The appointed court investigator is *(name)*:  
 Address, telephone number, and email address:

**5. Conservator of the Person**

a. Reason for appointment (*check one*):

- (1)  The person who needs help is unable to provide for their personal needs for physical health, food, clothing, or shelter, and granting a limited conservatorship of the PERSON is the least restrictive alternative needed for their protection.
- (2)  The person who needs help has voluntarily requested appointment of a conservator and good cause has been shown for appointment.

b. Person appointed

(1) The court appoints *(name and address)*:

as  conservator  joint conservator of the PERSON of  
*(name of person who needs help)* and *Letters of Conservatorship* will issue upon qualification.

(2)  Additional persons appointed limited conservator of the PERSON are named on attached form GC-339C (*Additional Orders Regarding Joint Conservators*).

c. The conservator, joint conservator, or successor conservator (*check all that apply*):

- (1)  Is a professional fiduciary as defined by Business and Professions Code section 6501(f).
- (2)  Holds a valid, unexpired, unsuspended license as a professional fiduciary issued by the Professional Fiduciaries Bureau of the California Department of Consumer Affairs under chapter 6 (commencing with section 6500) of division 3 of the Business and Professions Code.

License no.: \_\_\_\_\_ Issuance or last renewal date: \_\_\_\_\_ Expiration date: \_\_\_\_\_

d. The conservator, joint conservator, or successor conservator is (*check either 1, 2, or 3*):

- (1)  Not married to the person who needs help.
- (2)  Married to the person who needs help but not involved in any open family law case (divorce, annulment, legal separation).
- (3)  Married to the person who needs help and involved in an open family law case (divorce, annulment, legal separation) but it is in the best interests of the person who needs help to appoint the spouse as  conservator.  
 joint conservator.

e. The conservator, joint conservator, or successor conservator is (*check either 1, 2, or 3*):

- (1)  Not currently in a domestic partnership with the person who needs help.
- (2)  The domestic partner of the person who needs help and has neither terminated nor is planning to terminate that domestic partnership.
- (3)  The domestic partner of the person who needs help and is planning to terminate or already terminated the domestic partnership, but it is in the best interests of the person who needs help to appoint the partner or former domestic partner as  conservator.  joint conservator.





CONSERVATORSHIP OF <i>(name):</i> _____ <div style="text-align: right;">(PROPOSED) CONSERVATEE</div>	CASE NUMBER: _____
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7. c.  The treatment shall be performed by an accredited practitioner of a religion as defined in Probate Code section 2355(b).
- d.  The person who needs help (conservatee) has a major neurocognitive disorder as defined in Probate Code section 2356.5 and the court finds all other facts required to make the orders regarding placement or administration of medications. The conservator, joint conservator, or successor conservator of the person is granted the authority:
- (1)  To place the conservatee in a locked care facility described in Probate Code section 2356.5(b).
- (2)  To authorize administration of medications for the care and treatment of a major neurocognitive disorder described in Probate Code section 2356.5(c).

8. **Contacts and relationships**

- The conservator, joint conservator, or successor conservator of the person is granted the authority to control the rights of the conservatee to receive visitors, telephone calls, or personal mail.

9. **Marriage and domestic partnership**

- The conservator, joint conservator, or successor conservator of the person is granted the authority to grant or withhold consent to the marriage of or the entrance into a domestic partnership by the conservatee.

10. **Estate**

- Orders relating to the powers and duties of the conservator, joint conservator, or successor conservator of the estate as specified in form GC-339B/GC-340B are granted.

11.  Other orders as specified in an additional page that is attached to this order and labeled attachment 11 are granted.

12.  Attorney *(name):* \_\_\_\_\_ has been appointed by the court as legal counsel to represent the conservatee in these proceedings. The cost for representation is: \$ \_\_\_\_\_. The conservatee has the ability to pay  all  none  a portion of this amount. *(specify):* \$ \_\_\_\_\_.

13. This order is effective on the  date signed  the following date *(specify):* \_\_\_\_\_

14. Number of boxes checked in items 2–13: \_\_\_\_\_

15. Number of pages attached: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
 Judicial Officer

CONSERVATORSHIP OF <i>(name):</i>  (PROPOSED) CONSERVATEE	CASE NUMBER:
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**ADDITIONAL ORDERS REGARDING CONSERVATORSHIP OF THE ESTATE**  
**(Attachment to Order Appointing Limited Probate Conservator or Order Appointing Probate Conservator)**

1.  Bond is:
  - a.  Fixed at \$ \_\_\_\_\_ to be furnished by an authorized surety company or as otherwise provided by law.
  - b.  Not required.
  
2.  Deposits of \$ \_\_\_\_\_ are ordered to be placed in a blocked account at *(specify institution and location):*  
  
 \_\_\_\_\_ and receipts will be filed. No withdrawals are to be made without a court order.
  
3.  The conservator or joint conservator is not allowed to take possession of any money or property without a specific court order.
  
4. Special orders for limited conservators
  - a.  The limited conservator or limited joint conservator is entitled to possession and management of the following properties *(describe properties):*  
  
 \_\_\_\_\_
  
  - b.  The limited conservator or limited joint conservator is entitled to collect, manage, or file suit regarding debts, rentals, wages, or other claims due to the limited conservatee *(describe):*  
  
 \_\_\_\_\_
  
  - c.  The limited conservator or limited joint conservator may incur the following contractual or other obligations on behalf of the limited conservatee *(describe):*  
  
 \_\_\_\_\_
  
  - d.  The limited conservator or limited joint conservator may pay, settle, or defend claims against the limited conservatee *(specify claims):*  
  
 \_\_\_\_\_
  
  - e.  Other powers, limitations, or duties with respect to the management of the property as specifically and expressly granted *(describe):*  
  
 \_\_\_\_\_









CONSERVATORSHIP OF <i>(name):</i>	CASE NUMBER:
CONSERVATEE	

**NOTICE TO INSTITUTIONS AND FINANCIAL INSTITUTIONS**  
**(Probate Code sections 2890–2893)**

When these *Letters of Conservatorship* (Letters) are delivered to you as an employee or other representative of an *institution* or *financial institution* (described below) in order for the conservator of the estate (1) to take possession or control of an asset of the conservatee named above held by your institution (including changing title, withdrawing all or any portion of the asset, or transferring all or any portion of the asset) or (2) to open or change the name of an account or a safe-deposit box in your financial institution to reflect the conservatorship, you must complete and file form GC-050 (*Notice of Taking Possession or Control of an Asset of Minor or Conservatee*) (for an institution) or form GC-051 (*Notice of Opening or Changing a Guardianship or Conservatorship Account or Safe-Deposit Box*) (for a financial institution). An officer authorized by your institution or financial institution must date and sign the form, and you must file the completed form with the court.

There is no filing fee for filing the form. Check with the court that issued the Letters for further instructions on how to file the completed form.

The conservator should deliver a blank copy of the appropriate form to you with these Letters, but it is your institution’s or financial institution’s responsibility to complete the correct form, have an authorized officer sign it, and file the completed form with the court. If the correct form is not delivered with these Letters or is unavailable for any other reason, blank copies of the forms may be obtained from the court. The forms may also be accessed from the judicial branch’s public website free of charge. The internet address (URL) is [courts.ca.gov/forms](http://courts.ca.gov/forms). Select the form group *Guardianships and Conservatorships* and scroll down to form GC-050 for an institution or form GC-051 for a financial institution. The forms may be printed out as blank forms and filled in or may be filled out online and printed out ready for signature and filing.

An *institution* under Probate Code section 2890(c) is an insurance company, agent, or broker; an investment company; an investment bank; a securities broker-dealer; an investment advisor; a financial planner; a financial advisor; or any other person who takes, holds, or controls an asset subject to a conservatorship or guardianship other than a financial institution. Institutions must file form GC-050 for an asset of the conservatee held by the institution. A single form may be filed for all affected assets held by the institution.

A *financial institution* under Probate Code section 2892(b) is a bank, a trust, a savings and loan association, a savings bank, an industrial bank, or a credit union. Financial institutions must file form GC-051 for an account or a safe-deposit box held by the financial institution. A single form may be filed for all affected accounts or safe-deposit boxes held by the financial institution.

**LETTERS OF CONSERVATORSHIP**

**AFFIRMATION**

- 1.  PUBLIC GUARDIAN. No affirmation required (Prob. Code, § 2922(b)).
- 2.  INDIVIDUAL: I solemnly affirm that I will perform the duties of conservator according to law.
- 3.  INSTITUTIONAL FIDUCIARY *(name):*

I solemnly affirm that the institution will perform the duties of conservator according to law. I make this affirmation for myself as an individual and on behalf of the institution as an officer.  
*(Name and title):*

- 4. Executed on *(date):* \_\_\_\_\_, \_\_\_\_\_, California.
- at *(place):* \_\_\_\_\_, California.

▶ \_\_\_\_\_  
 Signature

**CERTIFICATION**

I certify that this document, including any attachments, is a correct copy of the original on file in my office, and that the Letters issued to the person appointed above have not been revoked, annulled, or set aside, and are still in full force and effect.

(SEAL)

Date: \_\_\_\_\_  
 Clerk, by \_\_\_\_\_, Deputy

CONSERVATORSHIP OF <i>(name):</i>  (PROPOSED) CONSERVATEE	CASE NUMBER:
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**ADDITIONAL POWERS FOR LIMITED CONSERVATORSHIP**  
**(Attachment to *Letters of Conservatorship*)**

1. Medical

- a.  The conservator or joint conservator of the person is granted the authority as specified in Probate Code section 2354 or if item 1b is checked, then the authority as specified in Probate Code section 2355. This power is shared with the conservatee.
- b.  The person who needs help (conservatee) lacks capacity to give informed consent for medical treatment. The conservatee may not make any medical decisions; the conservator has full power.
- c.  The treatment shall be performed by an accredited practitioner of a religion as defined in Probate Code section 2355(b).

2. Residence

- a.  The conservator or joint conservator of the person is granted the authority to choose the residence or specific dwelling of the conservatee. This power is shared with the conservatee.
- b.  The conservatee may not choose their own residence or specific dwelling; the conservator has full power.

3. Confidential papers

- a.  The conservator or joint conservator of the person is granted the authority to access the confidential records and papers of the conservatee. This power is shared with the conservatee.
- b.  The conservatee may not access their confidential records and papers; the conservator has full power.

4. Marriage and domestic partnership

- a.  The conservator or joint conservator of the person is granted the authority to grant or withhold consent to the marriage of, or the entrance into a domestic partnership by, the conservatee. This power is shared with the conservatee.
- b.  The conservatee may not marry or enter into a domestic partnership; the conservator has full power.

5. Contacts and relationships

- a.  The conservator or joint conservator of the person is granted the authority to control the social and sexual contacts and relationships of the conservatee. This power is shared with the conservatee.
- b.  The conservatee may not control their own social and sexual contacts; the conservator has full power.

6. Education

- a.  The conservator or joint conservator of the person is granted the authority to make educational decisions about the conservatee. This power is shared with the conservatee.
- b.  The conservatee may not make their own educational decisions; the conservator has full power.

7. Contracts

- The conservatee may not enter into legal contracts.

8. Other

- Other power or limit (*explain; add additional pages if necessary*):