ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL: ATTORNEY FOR:	*For Court Use Only*
SUPERIOR COURT OF CALIFONIA, COUNTY OF SAN BERNARDINO STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
☐ **Conservatorship of the ☐ Person and ☐ Estate of [☐ Limited]:** ☐ **In Re Matter of:**	CASE NUMBER: HEARING DATE AND TIME:
ORDER APPOINTING GUARDIAN AD LITEM – CONSERVATORSHIP	JUDICIAL OFFICER: DEPT:

This Court, on _____ (date), at_____(time) at _____(department)

hereby appoints _____as Guardian Ad Litem

[hereinafter "GAL"] to protect the rights and best interests of:

_____

☐ Proposed Conservatee ☐ Conservatee ☐ Other (please list) _____

and to be of beneficial assistance to the Court in the resolution of the matter.

THE COURT ORDERS, the Guardian Ad Litem shall have:

☐ Access to a complete case file from the court, without charge;

☐ Authority to file with the court, without charge, any petition, motion or legal pleading that may be of benefit to Proposed Conservatee/Conservatee;

☐ Access to obtain copies of court documents and to obtain certified copies of any court documents, without charge;

☐ Right to notice of any proceeding to which Proposed Conservatee/Conservatee is entitled to notice;

☐ Filed with the Court a written report by the next hearing date;

- ☐ Reasonable access for visitation with Proposed Conservatee/Conservatee with adequate notice;

- ☐ Access to any mental health and/or medical professional treating the Proposed Conservatee/Conservatee;

- ☐ Right to obtain medical records for Proposed Conservatee/Conservatee. The right to obtain medical information which would otherwise be protected and is governed under the Health Insurance Portability and Accountability Act of 1996 [HIPPA], 42 USC §1320d and 45 CFR pts 160, 164, and California law. This release of information extends to all health care providers with respect to rights regarding the use and disclosure of identifiable protected health information or other medical records. This release of information extends to all medical persons including, but not limited to, any physician, health care professional, dentist, health plan, hospital;

- ☐ Right to Seek independent psychological or medical evaluation of Proposed Conservatee/Conservatee for purpose of any pending proceedings, upon application to the Court;

- ☐ Right to Obtain copies of any and all estate planning documents executed by Proposed Conservatee/Conservatee or which names Proposed Conservatee/Conservatee as the primary or contingent beneficiary, including but not limited to the following: Wills, Trusts, Powers of Attorney, Beneficiary Designations, and Transfer of Death Deeds;

- ☐ Right to File for or obtain an injunction, temporary restraining order, restraining order, protective order or any other type of injunction or protective order to protect Proposed Conservatee/Conservatee;

- ☐ Right to seek a special needs trust, trust or other testamentary instrument for the benefit of Proposed Conservatee/Conservatee, subject to Court approval;

- ☐ Right to obtain any and all Educational Records and information of Proposed Conservatee/Conservatee, including, but not limited to, any assessments, assessment plans, testing, reports, Individualized Education Plans, Attendance Records, School Medical Records (including immunizations, testing and care plans), and Special Education Records;

- ☐ Work with Court-Appointed Counsel, while maintaining the Proposed Conservatee/Conservatee's best interests to obtain preliminary settlement, subject to Probate Court approval of settlement agreements, including, but not limited to, dependent adult compromises, special needs trusts, and pooled trusts.

☐ Exclusive authority to advocate for Proposed Conservatee/Conservatee's best interest in litigation, including but not limited to, deciding strategy, filing pleadings, obtain discovery, trial decisions, object to proposed settlements that are not in the Proposed Conservatee/Conservatee best interest.

☐ Other orders (specify):

Date:

_____
Signature of Judicial Officer