GC-211 ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): FOR COURT USE ONLY FAX NO. (Optional): TELEPHONE NO .: E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME **GUARDIANSHIP OF THE PERSON ESTATE OF** (Name): CASE NUMBER: **CONSENT OF PROPOSED GUARDIAN NOMINATION OF GUARDIAN** CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE **CONSENT OF PROPOSED GUARDIAN** 1. I consent to serve as guardian of the person estate of the minor. Date: (TYPE OR PRINT NAME) (SIGNATURE OF PROPOSED GUARDIAN) **NOMINATION OF GUARDIAN** a parent of the minor a donor of a gift to the minor. I nominate (name and address): as guardian of the \_\_\_\_ person estate of the minor. 3. I am \_\_\_\_\_ a parent of the minor a donor of a gift to the minor. I nominate (name and address): as guardian of the person of the minor. estate Date: (SIGNATURE) (TYPE OR PRINT NAME) NOTICE: The guardian of the person of a minor child has full legal and physical custody until the child becomes an adult or is adopted, the court changes guardians, or the court terminates the guardianship. Parents or other interested persons must petition the court to terminate the guardianship. The court will not do so unless the judge decides that termination would be in the child's best interest.

	CONSENT TO APPOINTMENT OF C	JUARDIAN AND WAIVER OF N	IOTICE
4. I consent to appoin	tment of the guardian as requested in the Pe	etition for Appointment of Guardian	of Minor, filed on
(date): . I am entitled to notice in		n this proceeding, but I waive notice of hearing of the petition, including	
notice of any reque	st for independent powers contained in it. I	waive timely receipt of a copy of the	petition.
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DATE	(TYPE OR PRINT NAME)	(SIGNATURE)	RELATIONSHIP TO MINOR
DATE	(TYPE OR PRINT NAME)	(SIGNATURE)	RELATIONSHIP TO MINOR
DATE	(TYPE OR PRINT NAME)	(SIGNATURE)	RELATIONSHIP TO MINOR
Continued on	Attachment 4.		