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| ATTORNEY OR PARTY WITHOUT AN ATTORNEY (Name, State Bar number, and address):<br>NAME:<br>ADDRESS:<br>CITY, STATE, ZIP:<br><br>TELEPHONE NO:<br>FAX NO. (Optional):<br>EMAIL ADDRESS (Optional):<br>ATTORNEY FOR (Name): | <p style="text-align: center;"><i>FOR COURT USE ONLY</i></p> |
| <p style="text-align: center;"><b>SUPERIOR COURT OF CALIFORNIA COUNTY OF SANTA CRUZ</b></p> Santa Cruz Branch<br>701 Ocean Street, Room 110<br>Santa Cruz, CA 95060   |  |
| GUARDIANSHIP OF:  |  |
| <p><b>PETITION TENDERING RESIGNATION OF GUARDIAN</b></p>  | CASE NUMBER:   |

1. Petitioner (name) \_\_\_\_\_ is the duly appointed, qualified and acting guardian of the person of (names): \_\_\_\_\_
2. Petitioner has been acting as guardian since (date): \_\_\_\_\_ was appointed guardian of the PERSON on date: \_\_\_\_\_
3. At the time of the appointment a guardian was necessary and convenient for the following reason(s):
  - There was no one else to parent the minor.
  - The minor needed protection from abuse and neglect.
  - Other (explain): \_\_\_\_\_
4. It is no longer necessary that petitioner be the guardian for the following reason(s):
  - A new proposed guardian is seeking appointment and has filed a petition to be appointed successor guardian.
  - The minor has successfully petitioned for emancipation on \_\_\_\_\_.
  - The minor has nominated another person in place of petitioner.
  - Other (explain) \_\_\_\_\_
5. The best interest of the minor requires acceptance of petitioner's resignation as guardian for the following reasons:
  - Petitioner is unable to perform the duties of a guardian of the person of minor (explain): \_\_\_\_\_
  - Another proposed guardian is better positioned to assume legal custody of the minor (explain): \_\_\_\_\_
  - The minor will benefit by being placed in the legal custody of someone else (explain): \_\_\_\_\_
  - Other (explain): \_\_\_\_\_

GUARDIANSHIP OF:

CASE NUMBER:

6. Petitioner requests permission of the court to resign as guardian of the person of (name of minor(s)):

\_\_\_\_\_ and an order terminating the petitioner's appointment as guardian of the person of (name of minor(s)):  
\_\_\_\_\_.

Check here if you need more space. Continue to explain on a separate piece of paper and attach it to this page.

**This Petition must be filed with the Notice of Hearing – Guardianship or Conservatorship GC-020**

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

**Date:**

.....  
(TYPE OR PRINT NAME)



\_\_\_\_\_  
(SIGNATURE OF PETITIONER)

GUARDIANSHIP OF:

CASE NUMBER:

**PROOF OF SERVICE**

1. I am over age 18 and am not a party in this case. I live or work in the county where the mailing occurred.

2. **My (the server's) home or business address is:**

Street Address

City, State, Zip

3. I served the Petition Tendering Resignation of Guardian and Notice of Hearing on each person named below by putting a copy in a sealed envelope addressed as shown below AND

**depositing** the envelope with the United States Postal Service on the date and at the place shown in item 4 with the postage fully prepaid.

**placing** the envelope for collection and mailing on the date and at the place shown in item 4 following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in ordinary course of business with the United State Postal Service in a sealed envelope with postage fully prepaid.

4. **Date mailed:** \_\_\_\_\_ **Place mailed (city, state):** \_\_\_\_\_

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

Date Signed

Server Prints Their Name Here

Server Signs Their Name Here

**I mailed this notice to the following people:**

**Names of people served:**

**Addresses of People Served:**

Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
City, State, zip code: \_\_\_\_\_

Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
City, State, zip code: \_\_\_\_\_

Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
City, State, zip code: \_\_\_\_\_

Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
City, State, zip code: \_\_\_\_\_

Additional people are listed on an attachment