

- 4) Are you able to continue serving as Guardian of the Person? (If not, the Court will schedule a conference).

INCAPACITATED PERSON (I.P.) INFORMATION:

RESIDENCE:

- 1) What is the I.P.'s present address and telephone number? **(Please be aware that Court authorization is required when changing the I.P.'s living arrangements).**

- 2) Is the I.P.'s current residential setting best suited to his/her current needs? Yes or no; if no, please explain.

MEDICAL:

- 1) What is the I.P.'s current medical condition? **(Provide disability, illness, etc.)**

- 2) On what date was the I.P. last examined or otherwise seen by a physician? What was the purpose of that visit? Did he/she receive treatment or medication?

