**Superior Court of Washington, County of** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| In the Guardianship of: Respondent/s *(minors/children)* | No. Objection to Minor Guardianship(OB) |

**Objection to Minor Guardianship**

***Use this form*** *if you disagree with any type of Minor Guardianship Petition (regular, emergency, or standby).*

1. Your objection

Look at each section of the *Petition* and *Reasons for Guardianship*, if one was served on you. Now fill out below.

I am *(name)* , and my relationship to the children in this case is .

I object to the appointment of a guardian for the minor children in this case because *(check all that apply)*:

[ ] a parent is willing and able to perform parenting functions. (*Minor Guardianship)*

[ ] a parent will be willing and able to perform parenting functions during the next two year period. *(Standby Guardianship)*

[ ] a person is willing, able, and has authority to act in the circumstances and prevent substantial harm to the children. *(Emergency Minor Guardianship)*

Explain:

[ ] The appointment of *(name)* as guardian is not in the best interest of the children because:

[ ] The court should appoint *(name)*  as guardian for the children because:

[ ] Other reasons a guardianship is inappropriate:

2. Request

I ask the court to *(check all that apply)*:

[ ] deny the *Petition.*

[ ] grant the proposed *Petition* but appoint the guardian I proposed.

[ ] appoint the proposed guardians but grant my requests in sections **3** - **7** below.

[ ] appoint a lawyer for me. *(Fill out Motion to Appoint Lawyer form GDN ALL 021).*

3. Parents’ visitation

If the court appoints a guardian *(check one):*

[ ] I have no request about parents’ visitation.

[ ] I agree with what the *Petition* proposed about parents’ visitation.

[ ] I ask the court to approve the following visitation schedule for the parents:

[ ] I ask the court to approve my proposed *Visitation Attachment (form GDN M 104). (Only parents and children age 12 or older can propose Visitation.)*

4. Parents’ decision making

If the court appoints a guardian, *(check one):*

[ ] I have no request about parents’ decision-making.

[ ] I agree with what the *Petition* proposed about parents’ decision-making.

[ ] I disagree with what the *Petition* proposed about parents’ decision-making. I ask the court to order decision-making as follows *(who should be allowed to make what decisions)*:

5. Access to records

If the court appoints a guardian, *(check one):*

[ ] I have no request about access to records.

[ ] I agree with what the *Petition* proposed about access to records.

[ ] I disagree with what the *Petition* proposed about access to records. I ask the court to order the following *(who should be allowed to access what records)*:

6. Support, insurance, and taxes

[ ] Does not apply. The *Petition* did not ask for child support.

[ ] The *Petition* asked for child support and/or health insurance to be ordered.

I [ ] object [ ] agree because:

[ ] **Tax Issues** – I ask the court to order: *(name)*
has the right to claim the children as dependents for purposes of personal tax exemptions and associated tax credits on our tax forms.

7. Restraining Order

[ ] Does not apply. The *Petition* did not ask for a Restraining Order.

[ ] The *Petition* asked for a Restraining Order against *(name/s)* .

I [ ] object [ ] agree because:

|  |
| --- |
| ***Important!*** *If you want a Protection Order, you must file a Petition for Protection Order, form PO 001. You must file your Petition for Protection Order as a* ***separate case****. Ask the court clerk to relate (link) the protection order case together with this guardianship case.* |

**8. Fees and costs**

[ ] No request.

[ ] Order who should pay for court costs, attorney fees, guardian ad litem fees, court visitor fees, and other reasonable fees.

9. Other requests, if any

**Party filing objection fills out below:**

I declare under penalty of perjury under the laws of the State of Washington that the facts I have provided on this form (including any attachments) are true. [ ] I have attached *(#):* \_\_\_\_\_ pages.

Signed at *(city and state):* Date:

*Sign name here Print name*

The following is my contact information:

*Email:*  *Phone (Optional):*

I agree to accept legal papers for this case at *(check one):*

[ ] my lawyer’s address, listed below.

[ ] the following address *(this does* ***not*** *have to be your home address):*

*Street Address or PO Box City State Zip*

[ ] Email:

**Lawyer (if any) fills out below:**

*Lawyer signs here Print name and WSBA No. Date*

*Lawyer’s Street Address or PO Box City State Zip*

Email *(if applicable):*