

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Probate Court _____ County, Colorado Court Address: _____ _____	
In the Interest of:	
Ward/Protected Person	▲ COURT USE ONLY ▲
Attorney or Party Without Attorney (Name and Address):	Case Number:
Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Division _____ Courtroom _____
PETITION TO TRANSFER <input type="checkbox"/> GUARDIANSHIP <input type="checkbox"/> CONSERVATORSHIP FROM COLORADO TO RECEIVING STATE	

This petition is submitted pursuant to § 15-14.5-301, C.R.S. of the Uniform Adult Guardianship and Protective Proceedings Jurisdiction Act.

As the guardian and/or conservator, petitioner requests the court to approve the transfer of this Guardianship and/or Conservatorship, to _____ (County) in _____ (State).

1. The ward /protected person is physically present in or is reasonably expected to permanently move to the state identified above or the protected person has significant connections to the receiving state.

2. The petitioner requests that Colorado transfer this guardianship /conservatorship for the following reasons:

3. The petitioner has made reasonable and sufficient plans for care and services for the ward and/or has made adequate arrangements for the management of the protected person's property in the receiving state.

4. The petitioner will provide this petition and a Notice of Hearing Without Appearance (JDF 712) to persons entitled to notice. (§ 15-14.5-302(2), C.R.S.)

5. The interested persons given notice are as follows:

Name of Interested Person Requiring Notice in Colorado	Relationship to Ward/Protected Person

- By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.
- By checking this box, I am acknowledging that I have made a change to the original content of this form.

VERIFICATION

I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.

Executed on the _____ day of _____
 (date) (month) _____, _____ (year)

Executed on the _____ day of _____
 (date) (month) _____, _____ (year)

at _____
 (city or other location, and state OR country)

at _____
 (city or other location, and state OR country)

 (printed name)

 (printed name)

 (Signature of Petitioner)

 (Signature of Co-Petitioner, if any)

 Attorney Signature, (if any)

 Date