

STATE OF WYOMING       )  
                                      )SS  
COUNTY OF \_\_\_\_\_)

IN THE DISTRICT COURT  
  
\_\_\_\_\_ JUDICIAL DISTRICT

IN THE MATTER OF THE                        )  
GUARDIANSHIP OF                                )  
  )  
  )  
\_\_\_\_\_,    )  
An Adult,    )

Probate No. \_\_\_\_\_

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**CONSENT OR NOMINATION OF GUARDIAN**

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I, (full name of Proposed Ward) \_\_\_\_\_, am 14 years of age or older  
and:

1.     ☐ **I consent** to the appointment of \_\_\_\_\_ (name  
of proposed guardian) as my guardian.

**OR;**

☐ **I do not consent** to the appointment of \_\_\_\_\_  
(name of proposed guardian) as my guardian pursuant.

**OR;**

☒ **I Nominate** \_\_\_\_\_ (name of proposed  
guardian) as my guardian:

Relationship to the Proposed Ward: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address, if different: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_.

## VERIFICATION AND ACKNOWLEDGMENT

STATE OF WYOMING )  
 ) ss.  
COUNTY OF )

I, (full name of Proposed Ward) \_\_\_\_\_, swear/affirm under oath that I have read the foregoing Consent or Nomination of Guardian and that the statements set forth therein are true and correct to the best of my knowledge.

Signature of Proposed Ward

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code:\_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Notary Public/Deputy Clerk of District Court

My Commission/Term Expires: \_\_\_\_\_