

- Nursing home (Name of facility): _____
- Group home (Company Name): _____
- Other (adult foster-care, etc): _____

10. How long has the Protected Person resided at his/her current residence? _____

11. Has the Protected Person's residence changed in the last twelve months?

- No Yes

If yes, please provide the date of change and the reason for the change:

12. As the Co-Guardians do you believe the Protected Person is content with his/her living arrangements?

- Yes No

If no, please provide a brief explanation: _____

13. As the Co-Guardians do you believe the Protected Person has any unmet needs?

- No Yes

If yes, please provide brief explanation: _____

14. As the Co-Guardians we rate the Protected Person's living conditions as:

- Excellent Average Below Average

If below average, please explain: _____

As the Co-Guardians we have taken the following steps to improve the living conditions:

15. As the Co-Guardians we rate the Protected Person's day to day care as:

- Excellent Average Below Average

If below average, please explain: _____

As the Co-Guardians I have taken the following steps to improve the day to day care:

16. The Protected Person's primary physician is: _____

17. Check the appropriate box if the Protected Person has been seen by any of the following health care providers within the last year:

Psychiatrist: Name _____ Treated for: _____

Psychologist: Name _____ Treated for: _____

Dentist: Name _____ Treated for: _____

- Other: Name _____ Treated for: _____
18. During the past year the Protected Person's physical health has:
- remained the same
 - improved
 - deteriorated
- If improved or deteriorated, please explain: _____
-
19. During the past year the Protected Person's mental health has:
- remained the same
 - improved
 - deteriorated
- If improved or deteriorated, please explain: _____
-
20. Does the Protected Person have an estate? (SSI benefits are not an estate) No
 Yes
- If yes, are you the Co-Guardians of the Protected Person's estate? Yes No
- If yes, have you filed your Annual Account? Yes No
21. Do you receive money for acting as the Protected Person's Co-Guardians? No
 Yes
22. Do you receive any funds for the Protected Person's care? Please identify all that apply.
- SSI: Amount: _____
- SSDI: Amount: _____
- VA: Amount: _____
- SS Survivor Benefits: Amount: _____
- Trust Account: Amount: _____
- Other: Amount: _____
23. If you receive funds for the Protected Person's care, in what kind of account are the funds maintained?
- Separate designated account: Yes No
- Joint account with Protected Person: Yes No
- Other: Please identify: _____
24. When the Guardianship was granted as the Co-Guardians we posted a:
- personal surety bond
 - cash bond
 - corporate bond
- If a corporate bond was posted have you paid the premium for the next reporting period?
- Yes
 - No
25. As the Co-Guardians we believe our Guardianship powers should:
- remain the same
 - be increased
 - be decreased
- If increased or decreased is selected please explain: _____

26. The Denton County Probate Court has a standing requirement for all Guardians to have face-to-face visits in the Protected Person's residence a minimum of four times per year spread throughout the year.

As the Co-Guardians have you met this requirement? (If the Co-Guardians reside separately identify how often each Co-Guardian visits.)

No

Please explain why you have not visited: _____

Yes, we reside with the Protected Person; or we visit weekly every other week monthly

Please list the dates of visits if different from the choices above. _____

27. During the past year the Protected Person has participated in the following activities:

Recreational: (list activities) _____

Educational: (list activities) _____

Social: (list activities) _____

Occupational: (list activities) _____

Limited ability to participate but enjoys: (list activities) _____

28. Please use this space to share any other information that you would like the Court to know about the Protected Person and/or your role as Guardian including any new medical issues or concerns.

29. Texas Estates Code Section 1151.351 (enacted 6.21.15) requires the Guardian each year on annual renewal of the Guardianship to explain the rights delineated in the "Ward's Bill of Rights" in the Protected Person's native language, or preferred mode of communication, and in a manner accessible to the Protected Person. In addition to explaining those rights, the Court requires the Guardian each year to provide a copy of the Bill of Rights to the Protected Person. Have you, as Guardian, explained the rights delineated in the Bill of Rights and provided the Protected Person a copy of the Bill of Rights?

Yes No

