

S.C. No. _____

IN THE SUPREME COURT OF THE YUKON TERRITORY

PURSUANT TO THE *ADULT PROTECTION AND DECISION MAKING ACT, S.Y. 2003, C.21*
 IN THE MATTER OF THE APPLICATION FOR GUARDIANSHIP OF

(name of adult)

also known as, (if applicable)

GUARDIANSHIP APPLICATION

Name of Applicant _____
 (name of applicant who is asking to be appointed as principal guardian)

1 DATE AND LOCATION OF HEARING OF THIS APPLICATION

This application will be heard by a Justice of the Supreme Court of the Yukon Territory on,

_____ the _____, day of _____, _____ at _____, or so
 (day of week) (day) (month) (year) (am/pm)

soon thereafter as may be heard, at The Law Courts, 2134 Second Avenue in the City of Whitehorse in the Yukon Territory.

2 NOTICE TO PERSON(S) BEING SERVED

This is to notify you that if you or your lawyer do not attend before the court at the time and place shown above, the court may give the applicant(s) what they want in your absence.

Therefore, if you want to make representations at the hearing, you or your lawyer must attend in court on the date and time prescribed above.

3 APPLICATION

I am applying for an order appointing me to be the principal guardian for the adult.

(Check any of the following paragraphs that are applicable.)

- I am also applying to have the following person(s) appointed to act as guardian(s) jointly with myself.

(name of proposed joint guardian)

(name of proposed joint guardian)

- I am also applying to have the following person(s) appointed to act as alternate guardian(s).

(Give particulars as to circumstances in which alternate guardian is to act. Attach separate sheets if necessary.)

(name of proposed alternate guardian)

(particulars)

(name of proposed alternate guardian)

(particulars)

- My application requests the assignment of different powers to different guardians, or it involves other terms or conditions for the exercise of the powers of different guardians.

(Give particulars for each guardian under section 5 "Guardianship Powers Being Sought.")

4 PERSONS TO BE SERVED

Pursuant to section 30(5) of the *Adult Protection and Decision Making Act*, the following are the persons who must be served with a copy of this application and accompanying documents (listed in section 11 of this application) at least seven (7) days prior to the hearing of the application: *(Check off and complete only those which apply.)*

- the adult who is the subject of this application

the adult's spouse, _____

- the adult's

child, named _____, born on the
_____, of _____, _____.

(day)

(month)

(year)

parent, named _____

sibling, named _____

any other adult relative other than a relative by marriage, named _____

- the proposed guardian(s) named,

- the person in charge of any hospital to which the adult is currently admitted or any care facility where the adult resides,

- the Public Guardian and Trustee
- _____, who is authorized to act on behalf of the adult under a power of attorney
- _____, who is a proxy for the adult under a health care directive
- _____, who is an associate decision-maker for the adult under a supported decision-making agreement
- _____, who is a representative for the adult under a representation agreement
- in the case of an application made for a person who is 18 years of age,
_____, who is a person who has custody of the person pursuant to the *Children's Act*.

5 GUARDIANSHIP POWERS BEING SOUGHT

NOTE: The *Adult Protection and Decision Making Act* provides as follows: “37(1) The Supreme Court may give a guardian only the authority that

- (a) is necessary to make, or assist in making, decisions about the adult’s affairs;
- (b) will result in the most effective, but the least restrictive and intrusive, form of assistance and support for the adult; and
- (c) is required to provide the care, assistance, and protection necessary to meet the adult’s needs.”

I am asking the Court to give me the power to make decisions for the adult respecting the following:

(Include only those which apply. If more than one guardian is to be appointed, whether joint, alternate or otherwise, attach separate sheets listing the authority you are asking the court to give to each of them. In situations where the options in this section of the form are not appropriate, the applicant may express their request for guardianship powers in their own words.)

- 1. the adult’s estate;
- 2. the adult’s living arrangements;
- 3. the adult’s social activities;
- 4. the adult’s employment;
- 5. the adult’s educational, vocational or other training;
- 6. whether the adult should apply for any licence, permit, approval or other consent or authorization required by law that does not relate to the adult’s estate;
- 7. legal proceedings that do not relate to the adult’s estate;
- 8. in accordance with the *Care Consent Act*, the provision of care to the adult;

- 9. the adult's daily living activities, including decisions about the adult's hygiene, diet and dress, social activities and companions;
 - 10. the restraint of the adult;
 - 11. the temporary care, education, and financial support of the adult's minor children, or any other persons who are cared for or supported by the adult;
 - 12. other: *(Give particulars. Attach separate sheets if necessary.)*
-

I request that the following limitations, conditions or requirements apply to the authority requested:

(Give particulars. Where separate limitations, conditions or requirements apply to different guardians, state them separately for each guardian. Attach separate sheets if necessary.)

1. _____

2. _____

3. _____

6 Subsequent guardianship plan

I am filing a preliminary guardianship plan with this application.

I am asking to be excused from the need to file a subsequent guardianship plan, or I am asking for the following terms and conditions with respect to filing a subsequent guardianship plan:

7 COSTS

I am asking that the costs of the application be paid out of the adult's income or assets as follows: *(Give particulars.)*

8 REVIEW OF ORDER

I am asking that the Court order a review of the Guardianship Order within _____ months of the date of the Guardianship Order.

9 GUARDIAN’S REMUNERATION

I am asking that the Court order that the guardian(s) be remunerated from the adult’s income and assets as follows: *(Give particulars.)*

10 GUARDIAN’S EXPENSES *(Delete if not applicable.)*

I am asking that the Court order that the guardian(s) be reimbursed from the adult’s income and assets for reasonable expenses properly incurred in performing the duties or exercising the authority given under this application.

11 DOCUMENTS ACCOMPANYING THIS APPLICATION

1. Applicant’s Affidavit (Form 4);
2. Statement of Proposed Guardian (Form 5) for each proposed guardian;
3. Incapability Assessment Report (Form 6);
4. Preliminary Guardianship Plan (Form 7)
5. Copy of each document in which the adult’s wishes respecting the choice of a guardian are expressed;

I will file an affidavit of service for each person required to be served under section 4 of this application.

I am relying on the provisions of the *Adult Protection and Decision Making Act*, and its regulations in support of my application.

(applicant’s signature, or signature of applicant’s solicitor)

Date (day/month/year)

The address of the registry is:

The Law Courts
2134 Second Avenue
Whitehorse, Y.T. Y1A 5H6

The APPLICANT'S address for delivery is:

(include physical address if address for delivery is a box number)

Fax Number for Delivery *(if any)* _____

The name and office address of the applicant's solicitor is: *(if applicable)*

SWORN before me at the City of

_____ ,

in the Yukon Territory on the _____ day

_____ .

(month)

(year)



(Applicant's Signature)

A Notary Public in and for the Yukon Territory

S.C. No. _____

IN THE SUPREME COURT OF THE YUKON TERRITORY

PURSUANT TO THE *ADULT PROTECTION AND DECISION MAKING ACT, S.Y. 2003, C.21*
IN THE MATTER OF THE APPLICATION FOR GUARDIANSHIP OF

(name of adult)

also known as, *(if applicable)*

GUARDIANSHIP APPLICATION

Address

