

STATE OF NORTH DAKOTA  
COUNTY OF \_\_\_\_\_

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

**IN THE MATTER OF THE GUARDIANSHIP OF**

\_\_\_\_\_,  
**AN ALLEGED INCAPACITATED INDIVIDUAL**

Case No. \_\_\_\_\_

**ORDER FOR APPOINTMENT OF GUARDIAN AD LITEM**

**Petition for Appointment was for a  Full  Limited Guardian.**

**Date petition was filed:**

**Name of Judge or Judicial Referee:**

**Courthouse/city in which to appear:**

**Date of hearing:**

**Time of hearing:**

**Name of attorney appointed as guardian ad litem:**

**Guardian ad litem's address:**

**Telephone No.**

1. The Petition for Appointment of a Guardian was filed as indicated above. The petition will be heard by the above indicated judge on the date, time and location listed above.
2. The attorney listed above is appointed to act as guardian ad litem.
3. The guardian ad litem shall explain the guardianship proceeding to the alleged incapacitated individual using language, communication, and terms which can be understood by the alleged incapacitated individual, including the nature and consequences of the proceeding, the rights of the alleged incapacitated individual, and available legal options.
4. The guardian ad litem shall advocate for the best interests of the alleged incapacitated individual. The attorney appointed as guardian ad litem may not represent the alleged incapacitated individual in a legal capacity.

5. **THE GUARDIAN AD LITEM SHALL SUBMIT A RESPONSE TO THE PETITION AT LEAST 5 DAYS PRIOR TO THE HEARING.**

6. The court will determine who will be responsible for the costs of the guardian ad litem's services.

7. The guardian ad litem shall have access to the legal, financial, and medical records, including psychiatric, mental health, psychological, and chemical dependence records, of the alleged incapacitated individual.

BY THE COURT:

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Judge of the District Court  
Judicial Referee of the District Court