

SHINGLE SPRINGS BAND OF MIWOK INDIANS TRIBAL COURT

P.O. Box 1340, Shingle Springs, CA 95682 Telephone: (530) 698 – 1446

Website: https://www.shinglespringsrancheria.com/tribal-court/

PUBLIC GUIDE INFORMATION SHEET

TOPIC: Conservatorship of Estate/Per Capita/Elders Stipend Payments

How to Fill Out a Petition for Conservatorship of the Person, Form FL-510 Please read these instructions before filling out the form. If you have questions, please contact the Clerk of the Court or your Tribal Services Advocate. While Court staff cannot provide you with legal advice, staff may be able to provide you with referrals and resources to those who can assist you.

Information of Person Filing Form

Name: Write your full name.

Address: Write your street address, city and zip code.

Phone: Write the phone that you can be reached at most easily.

<u>I am</u>: If you are the person filing this petition, please put a check next to "Petitioner." If you are a lawyer or advocate who is representing someone else, please put a check next to

"Attorney/Advocate for" and write the name of the person/tribe you are representing in the space below.

Case No.: You do not need to fill in the case number. The Tribal Court will fill this in.

Name of person in need of a conservator: Please write the name of the adult you are asking the Tribal Court to appoint a conservator for.

Tribal Member? Check the box yes or no depending on whether the adult is a Tribal Member.

Date of Birth: Write in the date of birth of the adult who is in need of a conservator.

Current Residence/Home Address: Write in the street address, city and zip code for the adult you are asking the Tribal Court to appoint a conservator for.

Question 1. Check all boxes that apply. This is the section where you are telling the Court that the adult is not able to take care of their own affairs without someone managing them. You have two boxes to select. You can select one or both. Check the first box if the adult needs someone to manage the adult's per cap moneys and/or their Elder Stipend for him/her. Check the second box if the adult themselves need someone to help take care of their person (ie. daily care of getting food, taking baths, staying physically safe etc.).

Question 2. This is optional so if you do not have this, you can still file the Petition. However, if you have documentation from a California licensed psychiatrist, clinical psychologist, or physician recommending a conservatorship for the adult, please attach the documentation to this Petition. While you do not have to have this document, if you have one you should attach it so that the doctor's information will be considered by the Judge along with the Petition.

Question 3. Petitioner Information

All information provided below should refer to the Petitioner only. The petitioner is the person asking the Tribal Court to appoint a conservator for an adult (the proposed Ward). If you are the

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petitioner, fill out this section with your personal information. If you are filling out this form on behalf of the petitioner, fill out this section with the petitioner's information, not your own. These instructions assume you are the Petitioner. [Please note that if the Tribe or Tribe's attorney is the Petitioner, they skip a-f.]

- a. Petitioner(s) Name: Write your name on this line.
- b. Petitioner(s) Date of Birth: Write your date of birth on this line.
- c. Petitioner(s) Occupation(s): Write your occupation.
- d. <u>Petitioner Home Address/Residence</u>: Write the street address, city and zip code of your home address.
- e. <u>Petitioner Mailing Address</u>: If the petitioner's mailing address (the address where you receive mail, not necessarily where you live) is different from the address written in line (d), write the street address, city and zip code of your mailing address here. If the home address and mailing address are the same, leave this line blank.
- f. <u>Petitioner is a Tribal Member</u>: Check yes if you are a Shingle Springs Band of Miwok Indians Tribal Member, check no if you are not.
- g. <u>Petitioner is</u>: Check the box that best describes you. If none of the boxes apply, please check "Other" and describe your relationship to the proposed Ward (the adult you want the Tribal Court to appoint a conservator for).

h. Criminal History

- i. If you want to be considered as a conservator for the proposed Ward, you **must** check this box. By checking this box, you are consenting to a criminal background check by the Tribe. If you **do not** want to be considered as a conservator, leave this box unchecked and check box (iii).
- ii. Check the first box if you **do not** have any criminal history. Check the second box if you **do** have a criminal history and briefly explain that history on the lines provided. You can still be appointed as a conservator in certain situations, even if you have a criminal history.
- iii. Finally, check the last box if you **do not** intend on becoming the conservator of the proposed Ward **or** if you will not be the only conservator (i.e. there might be more than one conservator appointed). If you check this box, you will need to complete Form FL-510 as an additional form that provides more information about the proposed conservator(s). The proposed conservator(s) will also need to each sign the Form FL-510.

Question 4: Family Members' Information

You have to check either box a or b.

a. Check this box if you do not want family members to receive copies of the legal documents in this case. By law, the family members are entitled to receive a copy of the Conservatorship Petition but you can check this box and attach an explanation for the Tribal Court as to why you think the Court should waive (not enforce) this law. If the Court grants the request, you will not have to notify the family members.



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b. Check this box if you did not check box (a). By checking this box the adult Ward's family members will receive a copy of the Petition. Using the table provided, please list the names and addresses of the proposed adult Ward's family members. Family members include parents, grandparents, children, and siblings over the age of 18.

In the first column, describe the family members' relationship to the proposed adult Ward (e.g. Parent, Grandparent, etc.). Then, write the family member's full name. Finally, write the street address, city and zip code where the family member lives. If you need more space for additional family members, write their information on a separate piece of paper and attach that paper to the petition.

Question 5: Other Court Cases

This section asks if you know of any other court cases that involve the proposed adult Ward. If you do not know of any other court cases, please check the first box. If you do know that the proposed adult Ward is involved in other court cases, check the second box and provide information about the other court cases in the table provided. Please describe the case briefly, state where the court case is being heard (County Court, State Court, Tribal Court, etc.) and write down the case number if you know it.

Question 6: Request to Court

Please check all of the boxes that apply to your Petition in this section.

By checking the first box, you are asking the court to find the proposed adult Ward legally incompetent and appoint a conservator to be responsible for the proposed Ward's physical health, food, clothing, and shelter.

By checking the second box, you are asking the court to find the proposed adult Ward legally incompetent and appoint a conservator to be responsible for managing the proposed Ward's Per Capita Distribution money and/or their Elder Stipends.

This third box has two parts. First, By checking the box next to "The Tribal Member", you are stating that you believe the Tribal Member is unable to manage their care or their safety or their Per Capita Distributions or Elder Stipends.

→ If you check this box, you must then check whether you think their inability to manage is temporary or permanent.

Reason for Request

Use the lines provided to explain why the Court should appoint a conservator for the proposed Ward. Please use specific facts to support your reasons. If you need more space for your explanation, please continue writing on a separate sheet of paper, attach it to the Petition and check the box below the provided lines.



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Question 7: If you are the Petitioner (person filing the Petition) **and** you are also the proposed Conservator (person who would manage the adult Ward's Per Capita Distributions/Elders Stipend or would care for the adult Ward's physical needs) then you need to check this box agreeing to owe a duty to the proposed adult Ward.

Signature

Write the petitioner's full name and date, then have the petitioner sign on the line provided.

Optional: Proposed Conservatee's Consent

If the adult Ward that you are filing the Petition about consents to the Conservatorship, they are free to show their consent by signing on the line provided. However, it is not mandatory that they sign so if they do not wish to sign or if you are unable to ask them to sign, then you may leave this section blank.

<u>Notice to Petitioner</u>: You are required to get someone to serve (mail/provide) a copy of the Petition to all parties and to file a "Proof of Service" form (GEN-108) with the Tribal Court. For more information on the Proof of Service form, please see our handout, "How to Fill Out a Proof of Service Form."

If you have any questions about how to fill out this form, or about the conservator process in general, contact the Tribal Court Self Help Center.

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Shingle Springs Band of Miwok Indians Tribal Court

> 5281 Honpie Road Placerville, CA 95667 (530) 698 – 1446

Self Help Center
Open 8-5, M-F
Attorney consultation by appointment only.