

IN THE CIRCUIT COURT OF THE CITY OF ST. LOUIS
STATE OF MISSOURI
PROBATE DIVISION

In the Estate of: _____)
)
)
) Estate No. _____)
)
 INCAPACITATED/DISABLED)

ANNUAL STATUS REPORT BY GUARDIAN OF ADULT

1. Present address of your Ward _____
_____. Is
this a private home nursing home residential care facility mental
health or retardation facility _____. If your Ward has died, what was
his/her date of death? _____.

Please provide the Court with a photo copy of the Ward's death certificate.

2. Present address(es), telephone number(s), and email address(es) of all
Guardians. _____

If the Guardian has died, what was his/her date of death? _____.

Please provide the Court with a photo copy of the Guardian's death certificate.

3. If your Ward does not reside with you, when was the last time you saw your
Ward? _____. How often do
you see your Ward? Daily Weekly Monthly Quarterly _____.

Describe the nature of your contact with the Ward _____

4. Is the Ward able to participate in decisions regarding his/her health care and
residential placement? _____.

5. If your Ward resides in a mental health or habilitation facility: Is there an
individual support plan, treatment plan, or plan for future care for your Ward?
_____. If yes, please attach a copy of the plan to this Report.

6. When was the last time you met with the treatment team? _____. Do you agree with the treatment plan? _____. If not, why? _____

7. Provide the name, address and telephone number of your Ward's physician.

When did your Ward last see his/her physician? _____. What was the reason for the visits? _____

8. Describe any major changes that you have observed in your Ward's physical or mental condition since your last Annual Status Report or since you were appointed Guardian if this is your first Report. _____

9. Do you intend to change the Ward's level of care during the coming year? _____. If yes, please describe the changes that you intend to make.

If you wish to modify or terminate your authority as guardian you must contact an attorney and file a written request, along with supporting documentation, according to the appropriate provisions of Chapter 475 of the Missouri Statutes. The Court cannot modify or terminate a guardianship based upon a request contained in the Annual Status Report.

Guardian

Date

Guardian

Date

Please return this form by first class mail or email to: Probate Division, 22nd Judicial Circuit, 10th Floor, 10 North Tucker, St. Louis MO 63101, stlprobate@courts.mo.gov.