

COUNTY[IES] DIVISION	TRIAL COURT OF MASSACHUSETTS JUVENILE COURT DEPARTMENT	DOCKET NO.
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Guardianship of Minor: _____

NOMINATION BY MINOR OF PERSON(S) TO BE APPOINTED AS GUARDIAN(S)

I, _____, am 14 years of age or older and
 (print or type full name)

I nominate _____ and
 (print or type nominated guardian(s) full name)

_____ to be appointed as
 (print or type nominated guardian(s) full name)

my guardian(s).

Date: _____ Signature of Minor _____

NOTARIZATION

_____ being fourteen years of age or older,
 (print or type full name)

personally appeared before me on _____ and nominated
 (date)

_____ as his/her guardian(s).
 (print or type proposed nominee(s) name(s))

My Commission Expires: _____
 NOTARY PUBLIC/JUSTICE OF THE PEACE