

COMPLAINT ABOUT A GUARDIAN OR CONSERVATOR

Use this form if you have concerns about the guardianship or conservatorship of a protected person, but you are not a party in the case and do not wish to be a party. If you are a party to the case, or wish to make specific changes to the guardianship or conservatorship order itself, file form [PG-190](#), *Petition for Review of Guardianship/Conservatorship*.

[Please answer all questions. If you do not know the answer, write "unknown." If it does not apply, write "N/A". The court may not review this complaint if you do not fill in each answer.]

Protected Person's Information.

Name of Protected Person: _____

Location in Alaska where case is filed: _____

Case Number: _____

Type of Case: Guardianship Conservatorship Both

Your Information.

*[You **must** provide this information. The complaint cannot be anonymous.]*

Name: _____

Email Address: _____

Mailing Address: _____

Phone: _____ cell home other Phone: _____ cell home other

Relationship to the Protected Person or to the Case:

Guardian's or Conservator's Information.

I do not know who is appointed.

Name: _____ Guardian Conservator

Email Address: _____ Phone: _____

Mailing Address: _____

Name: _____ Guardian Conservator

Email Address: _____ Phone: _____

Mailing Address: _____

Description of Complaint.

- 1. Briefly describe your concerns with the guardian or conservator. Describe what they did or did not do, what they said, and any other actions you are concerned about. Be as specific as possible and include dates, times, and places. Please attach copies of any relevant documents, such as court orders, petitions, letters to the protected person, etc.

2. Have you notified or sent a complaint to anyone else (nursing home staff, law enforcement, licensing board, adult protective services, elder fraud, etc.)?

No.

Yes, on the following date: _____. [Attach copy of the complaint, if any.]

I notified the following authority and received the following response or result:

3. Is the protected person aware of your concerns?

No.

Yes, they had the following response:

4. Have you discussed your concerns with the guardian or conservator?

No.

Yes, they had the following response:

5. I understand that this complaint will become part of the court file and may be disclosed to the appointed guardian or conservator, judicial officers, and others. I understand that I can ask for my identity to be confidential, but the judge will decide whether to grant confidentiality or not.

Do you want the judge keep your identity confidential?

No.

Yes, because:

6. I understand that if the judge decides an investigation is needed, even if my name is confidential, the contents of this complaint will be shared with the guardian or conservator. The guardian or conservator will have the right to tell their side to the court if there is an investigation.

I swear or affirm under penalty of perjury that everything I wrote in this complaint is true to the best of my knowledge and belief.

Date

Signature

Print or Type Name

Filing Instructions

Send this form to GuardianshipComplaint@akcourts.gov or fax to 907-264-0545.

If you cannot email or fax, call the Guardianship Helpline at 907-264-0520. They can help you fill out this form over the phone and file it for you.

This project was supported in part by grant number 90EJIG0025-01-00 from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201. Grantees undertaking projects with government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official ACL policy.

Page 2 of 2

PG-197 (1/25)

COMPLAINT ABOUT A GUARDIAN OR CONSERVATOR