## PETITION FOR COURT APPROVAL OF Case No. STANDBY GUARDIAN Commonwealth of Virginia VA. CODE §§ 16.1-350, 16.1-352 Juvenile and Domestic Relations District Court In re \_\_\_\_\_\_, a child under eighteen years of age **PETITIONER** RELATIONSHIP OF PETITIONER TO CHILD ADDRESS CHILD'S ADDRESS CHILD'S DATE OF BIRTH NAME AND ADDRESS OF QUALIFIED PARENT: NAME AND ADDRESS OF OTHER PARENT: NAME OF QUALIFIED PARENT NAME OF PARENT **ADDRESS ADDRESS** PROPOSED/DESIGNATED STANDBY GUARDIAN NAME OF PROPOSED/DESIGNATED STANDBY GUARDIAN ALTERNATE PROPOSED STANDBY GUARDIAN ADDRESS ADDRESS APPROVAL OF PROPOSED STANDBY GUARDIAN The Petitioner requests that be approved as the standby guardian NAME OF PROPOSED STANDBY GUARDIAN

## for ...... and ...... NAME OF CHILD NAME OF ALTERNATE STANDBY GUARDIAN be approved as the alternate. 2. The Petitioner requests that the standby guardian be given authority as a [ ] guardian of the person and/or [ ] guardian of the property of the minor. [ ] There is a significant risk that the qualified parent will imminently become physically or mentally incapable of caring for the child or die as a result of a progressive chronic condition or illness, or be detained, incarcerated, or deported in connection with an immigration action. It is not necessary for the Petitioner to produce records to establish this condition at the time of filing of the petition. The proposed triggering event is receipt by the standby guardian of [ ] a determination of incompetence of the parent [ ] a certificate of death of the parent or [ ] evidence of the detention, incarceration, or deportation of the parent connected to an immigration action, whichever is earlier; OR [ ] written consent of the qualified parent and filing of the consent with the Court upon the following conditions:

1. A copy of the written designation of	as standby guardian for
	NAME OF STANDBY GUARDIAN
NAME OF CUIL D	by
is attached.	NAME OF QUALIFIED PARENT
2. The authority of the designated standby guardian  [ ] A determination of incompetence of the pare  [ ] The death of the qualified parent. A copy of	ent. A copy of the determination is attached.  f the death certificate is attached.
-	of the parent connected to an immigration action. Evidence is attached. consent by the qualified parent to commencement of the authority of the ion and the written consent is attached.
A determination of incompetence or debilitation has	s been made. Determination was made on
by	
NAME OF PHYSICIAN	
e qualified parent's attending physician is:	
NAME AND	ADDRESS OF ATTENDING PHYSICIAN
easons why the child's other parent is not assuming or	should not assume the responsibilities of a standby guardian are:
ere [ ] is [ ] is not any prior judicial history regardi ild. If so, please provide details and case number, if k	ng custody of the child or any pending litigation regarding custody of the nown:
DATE	PETITIONER
e Petitioner appeared this date before the undersigned ition are true based on the Petitioner's knowledge.	and, upon being duly sworn, made oath that the facts stated in the foregoir
DATE	CLERK INTAKE OFFICER