

IN THE SUPERIOR COURT FOR THE STATE OF ALASKA AT \_\_\_\_\_<sup>1</sup>  
[Court location]

In the Matter of the Protective Proceeding of:

\_\_\_\_\_  
Protected Person (person who has a guardian or  
a conservator)

Alaska Case No.: \_\_\_\_\_

**PETITION TO TRANSFER GUARDIANSHIP/CONSERVATORSHIP INTO ALASKA**

This form may only be used for adult guardianships. For minor guardianships, first register the order in Alaska, then file a motion in the registration case to transfer jurisdiction to Alaska. You can use form [PG-690](#) to start this process.

**1. Petitioner.** My name is \_\_\_\_\_ and I am the  
 guardian  conservator for the protected person listed above.

Mailing Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

I agree that the court and other parties can email me documents instead of using regular mail.

Phone 1: \_\_\_\_\_ Phone 2: \_\_\_\_\_

Relationship to the protected person: \_\_\_\_\_

**2. Protected Person.**

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**3. Request.** I ask the court to approve the certified provisional order to transfer this guardianship/conservatorship from the State of \_\_\_\_\_ to Alaska.<sup>2</sup>

I have attached the following documents to this petition: **[Required]**

- A certified provisional order of transfer from the initiating (non-Alaska) state.
- A copy of my current guardianship/conservatorship order showing authority.
- A summary of the protected person’s need for services (medical, financial, care plan).

**4. Jurisdiction.** Jurisdiction (authority of the Alaska court) is appropriate, because:

- The protected person has lived in Alaska for at least six months.
- The protected person is reasonably expected to permanently move to Alaska.
- The protected person has a significant connection to Alaska, considering the factors in AS 13.27.180(3), as follows:

\_\_\_\_\_  
\_\_\_\_\_

<sup>1</sup> You must file this petition in a court location in the same judicial district where the protected person lives (guardianship or conservatorship) or where the protected person has property (conservatorship only).

<sup>2</sup> You can only use this form if you are transferring from a state that has adopted the Adult Guardianship and Protective Proceedings Jurisdiction Act. To find a list of the states that have adopted the act, go to <https://www.uniformlaws.org/committees/community-home?CommunityKey=0f25ccb8-43ce-4df5-a856-e6585698197a>

5. **Request for Court Hearing.**  I do not need a hearing.  I need a hearing, because:

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6. **Notice.** I gave notice of this petition to transfer guardianship/conservatorship as required by the law in **both** the initiating state **and** Alaska.

*[See last page of this form for how and to whom you must give notice in Alaska. The other state may have additional or different notice requirements.]*

7. **Information about the Guardianship/Conservatorship.**

a. Briefly describe the protected person's housing situation: *[Type of facility or home; name of facility, if applicable; type of assistance provided for daily living activities, if any; etc.]*

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b. List any services or providers that assist the protected person (for example, community care coordination or personal care assistance). Include contact information for each person or agency:

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c. Briefly describe the protected person's medical and mental health diagnoses and how they are being addressed:

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d. Is the protected person employed or going to school or job training?  No  Yes  
*[If yes, describe below. Include name and contact information for school or employer.]*

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e. Does the protected person have a "representative payee" for social security or other benefits?  No  Yes *[If yes, provide name, address, and phone below.]*

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f. Protected Person's Financial Information.

**Monthly Income**

Wages/Salary \_\_\_\_\_  
 Social Security \_\_\_\_\_  
 VA or Other Disability \_\_\_\_\_  
 Public Assistance \_\_\_\_\_  
 Pension or Retirement \_\_\_\_\_  
 Interest and Dividends \_\_\_\_\_  
 Annuities \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Monthly Expenses**

Food \_\_\_\_\_  
 Rent or Mortgage \_\_\_\_\_  
 Utilities \_\_\_\_\_  
 Transportation \_\_\_\_\_  
 Cell Phone \_\_\_\_\_  
 Insurance \_\_\_\_\_  
 Prescriptions/Other Medical \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**TOTAL INCOME**

**TOTAL EXPENSES**

**Assets**

Cash & Bank Accounts \_\_\_\_\_  
 Retirement Account \_\_\_\_\_  
 Stocks, Bonds, CDs, \_\_\_\_\_  
 Mutual Funds \_\_\_\_\_  
 Home \_\_\_\_\_  
 Other Land or Buildings \_\_\_\_\_  
 Vehicles \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Debts**

Home Mortgage \_\_\_\_\_  
 Other Mortgage \_\_\_\_\_  
 Credit Card Balance \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**TOTAL ASSETS**

**TOTAL DEBTS**

Please list the institutions where the protected person has savings, checking, or investment, or other financial accounts:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**8. Other Information.**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I certify under penalty of perjury that all the information I wrote in this petition is true to the best of my knowledge.

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Type or Print Name

**Certificate of Service**

I certify that on \_\_\_\_\_ [date], a copy of this notice was mailed or delivered to:

The protected person's spouse \_\_\_\_\_ by  certified mail\*  process server  
(name)

The protected \_\_\_\_\_ by  certified mail\*  process server  
person's parents  
(list names): \_\_\_\_\_ by  certified mail\*  process server

All of the protected person's adult children (list names):  
\_\_\_\_\_ by  first class mail  hand delivery by \_\_\_\_\_  
\_\_\_\_\_ by  first class mail  hand delivery by \_\_\_\_\_  
\_\_\_\_\_ by  first class mail  hand delivery by \_\_\_\_\_  
\_\_\_\_\_ by  first class mail  hand delivery by \_\_\_\_\_  
\_\_\_\_\_ by  first class mail  hand delivery by \_\_\_\_\_

None of the above relatives could be notified, so the notice was sent to the following close adult relative of the protected person: \_\_\_\_\_. Relationship to the protected person: \_\_\_\_\_ by  first class mail  hand delivery by \_\_\_\_\_

The protected person's conservator or guardian (if different from the petitioner): \_\_\_\_\_ by  first class mail  hand delivery by \_\_\_\_\_

The person who currently has care and custody of the protected person: \_\_\_\_\_ by  first class mail  hand delivery by \_\_\_\_\_

The protected person's attorney (if there currently is one): \_\_\_\_\_ by  first class mail  hand delivery by \_\_\_\_\_

The protected person's guardian ad litem (if there currently is one): \_\_\_\_\_ by  first class mail  hand delivery by \_\_\_\_\_

The following persons to whom the court has directed that notice be given (list names):  
\_\_\_\_\_ by  first class mail  hand delivery by \_\_\_\_\_  
\_\_\_\_\_ by  first class mail  hand delivery by \_\_\_\_\_

The following other interested persons (list names):  
\_\_\_\_\_ by  first class mail  hand delivery by \_\_\_\_\_  
\_\_\_\_\_ by  first class mail  hand delivery by \_\_\_\_\_

The following persons who have requested notice under AS 13.26.425 (list names):  
\_\_\_\_\_ by  first class mail  hand delivery by \_\_\_\_\_  
\_\_\_\_\_ by  first class mail  hand delivery by \_\_\_\_\_

\_\_\_\_\_  
Petitioner Signature

\_\_\_\_\_  
Type or Print Name

\* If the spouse or parents are outside Alaska, you can send this notice to them by ordinary first-class mail instead of certified mail. AS 13.26.296(b). File form [PG-117](#) if you use certified mail.