

GUARDIANSHIP QUESTIONNAIRE
Private and Confidential



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This questionnaire will be used by your attorney's office only. Your response to these questions will help to organize your case and will save you on your attorney's fees in trying to gather and assemble information after the case is in progress. Since your answers are being made to an attorney, you are assured of confidentiality and are protected by the attorney-client privilege. Please answer as fully as possible.

Your Personal Information

Date: _____

Legal Name: _____

List any other names used: _____

Social Security Number: _____ Driver's License No: _____

Birth Date: _____ Birth Place: _____

Please specify preferred contact information.

Present Address: _____

Mailing Address: _____

Home Telephone: _____ Cell Phone: _____

Email: _____

Spouse Information

Legal Name: _____

List any other names used: _____

Social Security Number: _____ Driver's License No: _____

Birth Date: _____ Birth Place: _____

Please specify preferred contact information for your spouse.

Present Address: _____

Home Telephone: _____ Cell Phone: _____

Email: _____

Other Parent of Ward

Legal Name: _____

List any other names used: _____

Social Security Number: _____ **Driver's License No:** _____

Birth Date: _____ **Birth Place:** _____

Other Relatives (Siblings)

Legal Name: _____

List any other names used: _____

Social Security Number: _____ **Driver's License No:** _____

Birth Date: _____ **Birth Place:** _____

Legal Name: _____

List any other names used: _____

Social Security Number: _____ **Driver's License No:** _____

Birth Date: _____ **Birth Place:** _____

Proposed Ward Information

Name: _____

Sex (M/F): _____ **Date of Birth:** _____ **Place of Birth:** _____

Social Security Number: _____ **Age:** _____ **Drivers License No:** _____

Current Residence: _____

Ward Lives With: _____

Reason for Seeking Guardianship: _____

Specific Conditions/Situations Necessitating Guardianship: _____

Any Current Power of Attorney or Court Appointed Relationships: _____

Any Property Owned by Ward: _____
