STATE OF VERMONT

SUPERIOR COURT

PROBATE DIVISION

Unit		Case	No
re Guardianship of:			
GUARDIAN'S A	NNUAL PERSONAL ST	ATUS REPORT	FOR MINOR
Γhe following is a report to th	ne Court concerning	name of minor	age of minor
for the period beginning	and ending	•	uge of minor
hereby state under oath tha			ho is under my guard
. Minor's current address:	1 .		
Mailing Address	*	Physical Address (if different)	
The minor resides <i>Icheck</i>	one):		
The minor resides (check	<i>′</i> —		
At my home. Please provide name of residential Minor's current health, d concerns and all aspects of	Other (describe)	es not reside with the guent of the second o	ny strengths and
At my home. Please provide name of residential Minor's current health, d	Other (describe) provider and address if minor do evelopment and health car	es not reside with the guent of the second o	ny strengths and
At my home. Please provide name of residential Minor's current health, d concerns and all aspects of	Other (describe) provider and address if minor do evelopment and health car	es not reside with the guent of the second o	ny strengths and

_	education program attended by minor; the minor's grade level; and any educational achievements.)
	Relationship between minor and minor's parents: (Describe contact between minor and edof minor's parents including frequency and duration of contact and whether contact was supervised. Describe degree to which parents are involved in decisions about minor.)
	My activities as guardian for the minor: (Describe the manner in which you have carried out your responsibilities and duties including efforts to include either or both parents in the minor's life.)
	Minor's Strengths, Challenges and/or Areas of Concern: (Describe the minor's strengths an challenges as well as any areas of concern to you)

8.	Minor's Financial Assets:				
	I □ am □ am not				
	 managing the minor's financial assets other than Social Security benefits. If you are, an annual summary of account must be filed with this report. I have attached a copy of the most recent report to Social Security regarding the minor's benefits. 				
9. Recommendations for changes to Guardianship Order: I recommend that the Guardianship Order be changed: ☐ Yes ☐ No If yes, attach a request to modify, amend or terminate Guardianship Order.					
unders		accurate to the best of my knowledge and belief. I e, I will be subject to the penalty of perjury or to other			
	ian Information	Signature			
		Printed Name			
Mailin	g Address	Phone Number			
		Email Address			
		-			
Co-Gu	ardian Information				
Date _		Signature			
		Printed Name			
Mailin	g Address	Phone Number			
		Email Address			