

# STATE OF MAINE

\_\_\_\_\_ COUNTY PROBATE COURT

DOCKET NO. \_\_\_\_\_

In Re: \_\_\_\_\_  
Alleged Incapacitated Person/Protected Person

**GUARDIANSHIP PLAN<sup>1</sup>**

1. Describe current and foreseeable future living arrangements of the alleged incapacitated person:
  
  
  
  
  
  
  
  
  
  
2. Describe how the alleged incapacitated person's medical, psychiatric and remedial needs will be met:
  
  
  
  
  
  
  
  
  
  
3. Describe how the alleged incapacitated person's financial needs will be met:
  
  
  
  
  
  
  
  
  
  
4. Describe how the alleged incapacitated person's social needs will be met including, but not limited to, how the alleged incapacitated person will continue to maintain contact with relatives and friends, as well as any other special needs of the alleged incapacitated person and how such needs will be met:

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature-Nominee

<sup>1</sup>See 18-A M.R.S. § 5-303(a). This plan shall be submitted to the court and all parties of record at least 10 days before any hearing on the petition. See 18-A M.R.S. § 5-303(d).