STATE OF MAINE

COUNTY PROBATE COURT	DOCKET NO
In Re:Respondent	GUARDIANSHIP PLAN¹ □ ORIGINAL □ REVISED
Describe the Respondent's medical conditioning, and levels of supervision needed.	ditions, cognitive functioning, every day
2. Describe the living arrangement, service expects to arrange, facilitate or continue for the Respon dwelling and/or move to a nursing home, mental health anticipated to occur during the upcoming year. ²	dent, including whether any change in
 Describe the social and educational active facilitate on behalf of the Respondent. 	vities the Petitioner/Guardian expects to

4. Identify any person with whom the Respondent has a relationship and any plan the Guardian has for facilitating visits with the person.
5. Describe the anticipated nature and frequency of the Petitioner's/Guardian's visits and communication with the Respondent.
6. Describe the goals for the Respondent including any goal related to the restoration of the Respondent's rights and how the Petitioner/Guardian anticipates achieving the goals.
 Describe whether the Respondent already has a plan in place and, if so, whether
the Petitioner's/Guardian's plan is consistent with the Respondent's plan.

	ment or list of the amount the Petitioner/Guardian proposes Petitioner/Guardian anticipates providing to the
Dated:	
	Signature-Petitioner/Guardian
	Order on Revised Plan
The Guardian shall provide a	an filed with the Court on is hereby approved. copy of the revised Plan to the Respondent, all persons entitled to 310(5) and the following additional person(s):
	P. 79(a) and at the specific direction of the Court, the Register shall rder is incorporated by reference.
Dated:	Judge of Duckete
¹ 18-C M.R.S. § 5-316. ² 18-C M.R.S. § 5-314(5).	Judge of Probate
MARP	