

The Adult Guardianship and Co-decision-making Regulations

being

Chapter A-5.3 Reg 1 (effective June 27, 2001) as amended by Saskatchewan Regulations [49/2002](#), [96/2005](#), [66/2011](#) and [30/2024](#).

NOTE:

This consolidation is not official. Amendments have been incorporated for convenience of reference and the original statutes and regulations should be consulted for all purposes of interpretation and application of the law. In order to preserve the integrity of the original statutes and regulations, errors that may have appeared are reproduced in this consolidation.

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CHAPTER A-5.3 REG 1

The Adult Guardianship and Co-decision-making Act

Title

1 These regulations may be cited as *The Adult Guardianship and Co-decision-making Regulations*.

Interpretation

2 In these regulations:

- (a) “**Act**” means *The Adult Guardianship and Co-decision-making Act*;
- (b) “**form**” means the appropriate form set out in the Appendix.

13 Jly 2001 cA-5.3 Reg 1 s2.

Forms prescribed

3 For the purposes of the Act:

- (a) Form A is the form for the application for:
 - (i) appointment as a personal co-decision-maker or personal guardian pursuant to section 14 of the Act; or
 - (ii) appointment as a property co-decision-maker or property guardian pursuant to section 40 of the Act;
- (b) Form B is the form for the affidavit of an applicant for an appointment mentioned in clause (a);
- (b.1) Form B.1 is the form for the affidavit of a person nominated to be an alternate decision-maker;
- (c) Form C is the form for the application for confirmation of a testamentary nomination of a personal co-decision-maker, personal guardian, property co-decision-maker or property guardian pursuant to section 64 of the Act;
- (d) Form D is the form for the affidavit of an applicant for a confirmation mentioned in clause (c);
- (e) Form E is the form for consent by a nearest relative to the appointment or confirmation mentioned in clauses (a) and (c);
- (f) Form F is the form for the affidavit of execution to be used in connection with Form E;
- (g) Form G is the form for the statement of objection pursuant to section 8 or 32 of the Act;
- (h) Form H is the form for the application for:
 - (i) appointment as a temporary personal guardian pursuant to section 19 of the Act; or
 - (ii) appointment as a temporary property guardian pursuant to section 44 of the Act;
- (i) Form I is the form for the affidavit of an applicant for an appointment mentioned in clause (h);

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- (j) Form J is the form for the assessment of the adult's capacity pursuant to section 12 or 38 of the Act;
- (k) Form K is the form for the statement of inventory with respect to an application for appointment of a property co-decision-maker or property guardian or for resealing a foreign order pursuant to subsection 53(1) or 65.1(3) of the Act;
- (l) Form L is the form for the annual accounting required pursuant to subsection 54(1) of the Act where an order is made for the appointment of a property co-decision-maker or property guardian;
- (l.1) Form L.1 is the form for the final accounting required pursuant to subsection 54.1(1) of the Act;
- (m) Form M is the form for the bond respecting an undertaking to properly act as a property co-decision-maker, property guardian, alternate property co-decision-maker or alternate property guardian pursuant to section 55, 64.1 or 65.1 of the Act;
- (m.1) Form M.1 is the form for the bond respecting an undertaking to properly act as a temporary property guardian;
- (n) Form N is the form for an order appointing a personal co-decision-maker, personal guardian, property co-decision-maker, property guardian, temporary personal guardian, temporary property guardian or alternate decision-maker pursuant to the Act;
- (o) Form O is the form for the notice of authority to act as property co-decision-maker, property guardian or temporary property guardian filed pursuant to subsection 57(1) of the Act;
- (p) Form P is the form for the withdrawal of notice pursuant to section 58 of the Act;
- (q) Form Q is the form for the amended notice pursuant to section 58 of the Act;
- (q.1) Form Q.1 is the form for the affidavit that must be filed by an alternate decision-maker who assumes the position of decision-maker pursuant to subsection 64.1(9) of the Act;
- (r) Form R is the form for the application to review, pursuant to section 66 of the Act, the appointment or testamentary nomination of a personal co-decision-maker, personal guardian, property co-decision-maker, property guardian, temporary personal guardian or temporary property guardian pursuant to the Act;
- (s) Form S is the form for an application to reseal a foreign order pursuant to section 65.1 of the Act;
- (t) Form T is the form for an affidavit in support of an application to reseal a foreign order;
- (u) Form U is the form for an order resealing a foreign order.

Fees for decision-makers

3.1(1) If the court has not made an order setting a fee for service, a person appointed pursuant to the Act to act as a property guardian for an adult may charge the following fees:

- (a) 2.5% of the money received by the property guardian on behalf of the adult per month;
- (b) 2.5% of the payments made by the property guardian on behalf of the adult per month.

(2) If there is more than one property guardian, the amount determined pursuant to subsection (1) must be divided among the property guardians:

- (a) equally;
- (b) as agreed by the property guardians; or
- (c) as determined by the court.

(3) If the court has not made an order setting a fee for service, a person appointed pursuant to the Act to act as a personal decision-maker for an adult may charge a fee of \$15 for each hour that he or she was engaged in management of the adult's personal affairs.

(4) If the court has not made an order setting a fee for service, a person appointed pursuant to the Act to act as a property co-decision-maker or a temporary property guardian may charge a fee of \$15 for each hour that he or she was engaged in management of the adult's property.

23 Sep 2011 SR 66/2011 s4.

Notification of hearing

4 For the purposes of sections 9 and 33 of the Act, notification of a hearing is to be provided by registered mail sent to the address included in the application, consents or statements of objection filed with the court.

13 Jly 2001 cA-5.3 Reg 1 s4.

Assessment

5(1) An applicant pursuant to section 6 or 30 of the Act shall provide at least two assessments in Form J of the adult's capacity for the purposes of section 12 or 38 of the Act.

(2) At least two of the assessments provided pursuant to subsection (1) shall be performed by one or more of the following:

- (a) a duly qualified medical practitioner;
- (b) a practising member as defined in *The Psychologists Act, 1997*;
- (b.1) a registered psychiatric nurse as defined in *The Registered Psychiatric Nurses Act*.
- (c) a registered nurse as defined in *The Registered Nurses Act, 1988*;
- (d) a practising member as defined in *The Occupational Therapists Act, 1997*;

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- (e) a practising member as defined in *The Social Workers Act*;
 - (f) a speech-language pathologist as defined in *The Speech-Language Pathologists and Audiologists Act*.
- (3) Every assessment provided pursuant to section 12 or 38 of the Act must include the following:
- (a) the name, address and telephone number of the assessor;
 - (b) the qualifications of the assessor;
 - (b.1) the reasons provided to the assessor for making the assessment;
 - (c) the assessor's personal relationship to and professional involvement with the adult;
 - (d) the process used in carrying out the assessment, including reference to the assessment tools or methods used, the number of visits with the adult, the results of interviews with caregivers and other professional reports relied on;
 - (e) the assessor's opinion respecting the adult's decision-making ability;
 - (e.1) the factors on which the assessor has based his or her opinion respecting the adult's decision-making ability;
 - (f) the assessor's opinion respecting the likelihood of change in the adult's decision-making ability;
 - (g) the assessor's opinion and recommendation respecting the adult's need for a co-decision-maker or guardian with respect to specific areas of decision-making.
- (4) Notwithstanding *The Health Information Protection Act*, personal health information as defined in that Act may be disclosed by a trustee as defined in that Act without the consent of the subject individual for the purpose of completing an assessment mentioned in subsection (3).

13 Jly 2001 cA-5.3 Reg 1 s5; 28 Jun 2002 SR
49/2002 s3; 16 Sep 2005 SR 96/2005 s3; 3 May
2024 SR 30/2024 s3.

Advocacy groups

- 6(1)** With respect to an application relating to an adult with an intellectual disability, the following are prescribed as advocacy groups for the purposes of clause (36(b)) of the Act:
- (a) Family and Friends of Cosmo and Elmwood, Inc. with respect to adults who are residents in a home operated by Elmwood Residences, Inc. of Saskatoon or who are participants in a day program operated by Cosmopolitan Industries in Saskatoon;
 - (b) the Saskatchewan Association for Community Living.
- (2) With respect to an application relating to an adult over the age of 55, Senior Power, Inc. is prescribed as an advocacy group for the purposes of clause 36(b) of the Act.

13 Jly 2001 cA-5.3 Reg 1 s6.

Exemption

6.1 The public guardian and trustee is exempted from the requirement to provide an annual accounting mentioned in subsection 54(1) of the Act or a final accounting mentioned in subsection 54.1(1) of the Act.

28 Jun 2002 SR 49/2002 s4; 23 Sep 2011 SR 66/2011 s5.

Dispensing with filing of bond

7 For the purposes of clause 55(4)(a) of the Act, the court may dispense with the filing of a bond where the value of the estate does not exceed \$10,000.

13 Jly 2001 cA-5.3 Reg 1 s7.

Limitations on gifts

7.1(1) Pursuant to clause 63.1(2)(c) of the Act, the total value of all gifts made in an annual accounting period must not exceed \$1,000.

(2) A property guardian shall not make a gift to himself or herself without the authorization of the court.

23 Sep 2011 SR 66/2011 s6.

R.R.S. c.D-25.1 Reg 1 repealed

8 *The Dependent Adults Forms Regulations* are repealed.

13 Jly 2001 cA-5.3 Reg 1 s8.

Coming into force

9(1) Subject to subsection (2), these regulations come into force on the day on which section 1 of *The Adult Guardianship and Co-decision-making Act* comes into force.

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FORM A
[Clause 3(a)]

In the King's Bench

Judicial Centre of _____

**Application for Appointment of a Decision-maker other than
a Temporary Personal Guardian or Temporary Property Guardian**

NOTE: *The Adult Guardianship and Co-decision-making Act* provides that a person served with a copy of this application may file a statement of objection with the court setting out the reasons he or she objects to the application.

1. I, _____, of _____, _____, apply to be appointed as: (*check as appropriate*)

personal co-decision-maker for _____ pursuant to section 14 of *The Adult Guardianship and Co-decision-making Act*

personal guardian for _____ pursuant to section 14 of *The Adult Guardianship and Co-decision-making Act*

property co-decision-maker for _____ pursuant to section 40 of *The Adult Guardianship and Co-decision-making Act*:

with a bond for \$ _____

without a bond

property guardian for _____ pursuant to section 40 of *The Adult Guardianship and Co-decision-making Act*:

with a bond for \$ _____

without a bond

1.1 I also apply to have _____ appointed as alternate guardian (*if applicable*).

2. Personal Decision-Making Authority: (*where application is for the appointment of a personal co-decision-maker or personal guardian*)

(a) I seek the authority to assist the adult with the following: (*where application is for the appointment of a personal co-decision-maker - check as appropriate*)

– or –

(a) I seek the authority to make the following decisions for the adult: (*where application is for the appointment of a personal guardian - check as appropriate*)

NOTE: *The Adult Guardianship and Co-decision-making Act* provides that the court shall not give the personal co-decision-maker or personal guardian the authority to act with respect to all the matters mentioned below if an order providing particular powers would be sufficient to meet the needs of the adult.

decisions respecting the adult's living arrangements

decisions respecting access to the adult

decisions respecting the adult's social activities

decisions respecting the adult's employment

decisions respecting the adult's educational, vocational or other training

decisions respecting whether the adult should apply for any licence, permit, approval or other consent or authorization required by law that does not relate to the estate of the adult

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- decisions respecting legal proceedings that do not relate to the estate of the adult
- decisions respecting the adult's health care, including decisions respecting admission to a health care facility or respecting treatment of the adult
- decisions respecting the restraint of the adult
- normal day-to-day decisions respecting the adult
- other: *(specify)* _____

(b) I request that the following limitations, conditions or requirements apply to the authority requested: *(optional)*

3. Property Decision-Making Authority: *(where application is for the appointment of a property co-decision-maker or property guardian)*

(a) I seek the authority to:

- assist the adult in making decisions with respect to matters relating to his or her estate *(where application is for the appointment of a property co-decision-maker)*

– or –

- make decisions with respect to matters relating to the adult's estate *(where application is for the appointment of a property guardian)*

(b) I request that the following limitations, conditions or requirements apply to the authority requested: *(optional)*

NOTE: *The Adult Guardianship and Co-decision-making Act* provides that the court shall consider whether an order appointing a property co-decision-maker or property guardian should be made subject to limitations, conditions or requirements, including limiting the authority of the property co-decision-maker or property guardian to decisions involving more than a certain dollar amount.

(c) With respect to the requirement of a bond: *(check as appropriate)*

NOTE: *The Adult Guardianship and Co-decision-making Act* provides that the court may dispense with the requirement to file a bond if the value of the estate does not exceed \$10,000 or if the nearest relative and public guardian and trustee consent in writing or in any other situation the court considers appropriate.

- I undertake to file a bond in the amount of \$ _____ pursuant to section 55 of *The Adult Guardianship and Co-decision-making Act* (see Form M)

- I request an order dispensing with the requirement to file a bond

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4. Service

NOTE: You must include the addresses of the persons listed below that have been served other than the Minister of Social Services and the public guardian and trustee.

(a) I have served the following persons with all of the documents filed as part of this application: *(check as appropriate)*

the adult with respect to whom the application is made

the public guardian and trustee *(where application is for the appointment of a property co-decision-maker or property guardian)*

the nearest relatives:

Name: _____

Relationship: _____

Name: _____

Relationship: _____

Name: _____

Relationship: _____

the Minister of Social Services *(where the adult is receiving services pursuant to section 10 or 56 of The Child and Family Services Act)*

the personal co-decision-maker, personal guardian or temporary personal guardian of the adult

Name: _____

Relationship: _____

the property co-decision-maker, property guardian or temporary property guardian of the adult

Name: _____

Relationship: _____

the attorney under a power of attorney given by the adult

Name: _____

Relationship: _____

the proxy under a health care directive made by the adult

Name: _____

Relationship: _____

the supporter nominated by the adult pursuant to section 9 of *The Personal Care Homes Regulations, 1996*

Name: _____

Relationship: _____

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- the person(s) who act(s) as trustee for the purpose of administering financial benefits on behalf of the adult

Name: _____

Relationship: _____

Name: _____

Relationship: _____

- other: *(specify)* _____

- (b) *(If applicable)* I seek an order stating that I am not required to serve the following persons:

NOTE: *The Adult Guardianship and Co-decision-making Act* provides that the court shall not dispense with service on the adult unless it is satisfied, on the basis of sufficient medical evidence, that special circumstances exist and service would be injurious to the adult and contrary to the best interests of the adult.

Name: _____

Relationship: _____

Name: _____

Relationship: _____

Name: _____

Relationship: _____

5. Review

I request that the order include the following terms: *(check as appropriate)*

- that the order be reviewed by the court in _____ months

- that the order not be reviewed by the court

NOTE: *The Adult Guardianship and Co-decision-making Act* provides that the court shall determine whether it is in the best interests of the adult to require a review of the order, and if a review is required, shall specify the period within which the review is to take place.

5.1. Fees

I plan to charge a fee and seek:

- to receive the following fee for services: \$ _____

or

- to charge fees as set out in the Regulations

or

- I will not charge a fee

6. Documents Attached

The following documents are filed with the court as part of this application: *(check as appropriate)*

- proof of service of application on all persons required to be served

- affidavit of proposed co-decision-maker or guardian (*Form B*)

- affidavit of proposed alternate decision-maker (*Form B.1*)

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- consent(s) of nearest relative(s) to appointment, if applicable without bond, of the proposed co-decision-maker or guardian and affidavit(s) of execution with respect to the consent(s) (*Forms E and F*)
- two or more assessments of the adult’s capacity (*Form J*)
- inventory of the estate of the adult (*where application is for the appointment of a property co-decision-maker or property guardian*) (*Form K*)
- bond undertaking to properly act as a co-decision-maker or guardian (*where application is for the appointment of a property co-decision-maker or property guardian*) (*Form M*)
- other: (*describe*) _____

Dated at _____, _____, this _____ day of _____, 20 _____.

(Signature of Applicant)

Address for service: _____

Phone: _____ Fax: _____

E-mail: _____

Permanent address (*if different from address for service*):

Phone: _____ Fax: _____

E-mail: _____

FORM B
[Clause 3(b)]

In the King's Bench

Judicial Centre of _____

**Affidavit in Support of an Application for Appointment of a Decision-maker other than a
Temporary Personal Guardian or Temporary Property Guardian**

I, _____, of _____, _____, MAKE OATH AND SAY:

1. THAT I am the applicant and have personal knowledge of the matters deposed to in this affidavit, except where stated to be on information and belief, and where so stated I believe them to be true.
2. THAT I am _____ years of age.
3. THAT I am the _____ (*state relationship*) of the adult named in the application (the "adult").
4. THAT the nearest relative(s) of the adult, other than myself, is (are):

| Name | Address | Relationship |
|-------|---------|--------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

5. THAT the adult was born on _____, and is now _____ years of age.

6. THAT the adult currently resides at:

Address: _____

Phone: _____

7. THAT the current living arrangements of the adult, including the name, address and telephone number of any person, institution or agency providing ongoing support or primary care and assistance to the adult are:

8. THAT I believe the adult is in need of a _____ for the following reasons:

9. THAT the adult needs or is likely to need to make the following types of decisions respecting his or her (*check as appropriate*) personal/ property needs: (*describe why you need the authority requested in your application*)

10. THAT the following resources, including less intrusive forms of support or assistance in decision-making, are available to assist the adult in making the decisions mentioned in paragraph 9: (*describe type and frequency of support or assistance*)

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11. THAT the following alternative ways to assist the adult have been tried or carefully considered:

12. THAT I believe the wishes of the adult are as follows: *(attach written statement of adult's wishes, if available, including the adult's wishes with respect to whether the authority requested should be granted and whether the proposed co-decision-maker or guardian is acceptable to him or her; indicate date signed, if possible)*

13. THAT I believe I would be a suitable _____ for the following reasons: *(where the deponent is not the public guardian and trustee)*

14. THAT I *(check as appropriate)* have/ have not been appointed as a decision-maker for another person pursuant to *The Dependent Adults Act* or *The Adult Guardianship and Co-decision-making Act* *(where the deponent is not the public guardian and trustee)*.

Details, including name and address of adult, date of order, authority granted and fees for services received: *(if applicable)*

15. THAT I *(check as appropriate)* have/ have not been in a relationship of financial trust with another person, including under a power of attorney.

Details: *(if applicable)*

16. THAT I *(check as appropriate)* have/ have not been convicted of, or received a pardon for, a criminal offence relating to assault, sexual assault or other acts of violence, intimidation, criminal harassment, uttering threats, theft or fraud. *(attach criminal record check completed by your local police service)*.

Details: *(if applicable)*

17. THAT I *(check as appropriate)* have/ have not been a respondent pursuant to *The Victims of Domestic Violence Act* or a defendant pursuant to a section of the *Criminal Code* relating to securing a peace bond.

Details: *(if applicable)*

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18. THAT I (check as appropriate) have/ have not applied for or been petitioned into bankruptcy. Details, including the status or outcome of that application or petition: (if applicable)

19. **Repealed.** 3 May 2024 SR 30/2024 s4.

20. THAT my general plan with respect to the adult or the adult’s estate is as follows:

(a) I plan to take the following actions: _____ ;

(b) I plan to make the following decisions with respect to the adult’s estate: _____

21. THAT the estimated value of the adult’s estate is as follows: (where application is for the appointment of a property co-decision-maker or property guardian)

22. THAT the adult’s property is currently managed as follows: (where application is for the appointment of a property co-decision-maker or property guardian)

23. (If applicable) THAT I request an order dispensing with the requirement to file a bond pursuant to section 55 of The Adult Guardianship and Co-decision-making Act for the following reasons: (where application is for the appointment of a property co-decision-maker or property guardian) (attach consent of nearest relative or public guardian and trustee, if applicable)

24. (If applicable) THAT the reasons I seek an order stating that I am not required to serve the following persons are:

NOTE: The Adult Guardianship and Co-decision-making Act provides that the court shall not dispense with service on the adult unless it is satisfied, on the basis of sufficient medical evidence, that special circumstances exist and service would be injurious to the adult and contrary to the best interests of the adult.

Name: _____

Relationship: _____

Reason for dispensing with service: _____

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Name: _____

Relationship: _____

Reason for dispensing with service: _____

25. THAT attached are the following exhibits, marked A to _____ , all of which I believe to be true copies of the originals: *(check as appropriate)*

power of attorney given by the adult *(where order appointing property co-decision-maker or property guardian is requested)*

health care directive made by the adult *(where order appointing personal co-decision-maker or personal guardian with authority respecting health care decisions is requested)*

last will and testament made by the adult *(where order appointing property co-decision-maker or property guardian is requested)*

written statement of the adult's wishes

other: *(describe)* _____

26. THAT no other application, other than the following, has been made to this court for the appointment of a personal co-decision-maker, personal guardian, property co-decision-maker or property guardian for the adult, to the best of my information and belief:

27. THAT I am not aware of any conflict of interest that presently exists or will exist if I should be so appointed.

27.1. THAT I understand that I must account annually to the court and the public guardian and trustee *(if application is for the appointment of a property co-decision-maker or property guardian)*

28. THAT I will undertake, on my appointment as co-decision-maker or guardian, to exercise the duties and powers assigned to me by the court diligently, in good faith and in the best interests of the adult. I will exercise my powers and duties in a way that encourages the adult to participate as fully as possible in decision-making and to act independently in all matters where he or she is able. I will protect the adult's civil and human rights and limit my interference in his or her life to the greatest extent possible.

29. THAT I make this affidavit in support of an application pursuant to *The Adult Guardianship and Co-decision-making Act* for an Order appointing me as the _____ for _____.

NOTE: If there is more than one applicant, each needs to complete Form B.

SWORN before me at _____)

Saskatchewan, this _____ day)

of _____, 20 _____)

(Signature of Applicant)

A Commissioner for Oaths in and for Saskatchewan

FORM B.1
[Clause 3(b.1)]

In the King's Bench

Judicial Centre of _____

Affidavit in Support of an Application for Appointment of an Alternate Decision-Maker

I, _____, of _____, _____, MAKE OATH AND SAY (OR DECLARE):

- 1. THAT I am the applicant and have personal knowledge of the matters deposed to in this affidavit, except where stated to be on information and belief, and where so stated I believe them to be true.
- 2. THAT I am _____ years of age.
- 3. THAT I am the _____ of the adult named in the application (the 'adult').
(state relationship)

4. THAT I believe I would be a suitable alternate _____
(type of decision-maker)

for the following reasons *(if the deponent is not the public guardian and trustee)*:

5. THAT I *(check as appropriate)* have / have not been appointed as a decision-maker for another person pursuant to *The Dependent Adults Act* or *The Adult Guardianship and Co-decision-making Act* *(if the deponent is not the public guardian and trustee)*.

Details, including name and address of adult, date of order, authority granted and fees for services received: *(if applicable)*

6. THAT I *(check as appropriate)* have / have not been in a relationship of financial trust with another person, including under a power of attorney.

Details: *(if applicable)*

7. THAT I *(check as appropriate)* have / have not been convicted of, or received a pardon for, a criminal offence relating to assault, sexual assault or other acts of violence, intimidation, criminal harassment, uttering threats, theft or fraud.

Details: *(if applicable)*

NOTE: Attach a copy of a criminal record check completed by your local police service.

8. THAT I *(check as appropriate)* have / have not been a respondent pursuant to *The Victims of Domestic Violence Act* or a defendant pursuant to a section of the *Criminal Code* relating to securing a peace bond.

Details: *(if applicable)*

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9. THAT I (*check as appropriate*) have / have not applied for or been petitioned into bankruptcy.

Details, including the status or outcome of that application or petition: (*if applicable*)

10. **Repealed.** 3 May 2024 SR 30/2024 s4.

11. THAT I am not aware of any conflict of interest that presently exists or will exist if I should be so appointed.

12. THAT I will undertake, on my appointment as alternate _____, to exercise the duties and powers assigned to me by the court diligently, in good faith and in the best interests of the adult. If called upon to act as a decision-maker, I will exercise my powers and duties in a way that encourages the adult to participate as fully as possible in decision-making and to act independently in all matters where he or she is able. I will protect the adult's civil and human rights and limit my interference in his or her life to the greatest extent possible.

13. THAT I make this affidavit in support of an application pursuant to *The Adult Guardianship and Co-decision-making Act* for an Order appointing me as the alternate _____ for _____.

SWORN (OR DECLARED)

before me at _____)

Saskatchewan, this _____ day)

of _____, 20 _____)

(*Signature of Applicant*)

A Commissioner for Oaths in and for Saskatchewan

My appointment expires _____

ADULT GUARDIANSHIP AND CO-DECISION-MAKING **A-5.3 REG 1**FORM C
[Clause 3(c)]

In the King's Bench

Judicial Centre of _____

Application for Confirmation of a Testamentary Nomination (Appointment by Will)

1. I, _____, of _____, _____, apply for confirmation of a testamentary nomination as: *(check as appropriate)*

personal co-decision-maker for _____

personal guardian for _____

property co-decision-maker for _____

property guardian for _____

2. Property Decision-Making Authority: *(where application is for the confirmation of a testamentary nomination as a property co-decision-maker or property guardian)*

With respect to the requirement of a bond: *(check as appropriate)*

NOTE: The Adult Guardianship and Co-decision-making Act provides that the court may dispense with the requirement to file a bond if the value of the estate does not exceed \$10,000 or if the nearest relative and public guardian and trustee consent in writing or in any other situation the court considers appropriate.

I undertake to file a bond in the amount of \$ _____ pursuant to section 55 of *The Adult Guardianship and Co-decision-making Act (see Form M)*

I request an order dispensing with the requirement to file a bond

3. Service

NOTE: You must include the addresses of the persons listed below that have been served other than the Minister of Social Services and the public guardian and trustee.

- (a) I have served the following persons with all of the documents filed as part of this application: *(check as appropriate)*

the adult with respect to whom the application is made

the public guardian and trustee *(where application is for the appointment of a property co-decision-maker or property guardian)*

the nearest relatives

Name: _____

Relationship: _____

Name: _____

Relationship: _____

Name: _____

Relationship: _____

the Minister of Social Services *(where the adult is receiving services under section 10 or 56 of The Child and Family Services Act)*

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the personal co-decision-maker, personal guardian or temporary personal guardian of the adult

Name: _____

Relationship: _____

the property co-decision-maker, property guardian or temporary property guardian of the adult

Name: _____

Relationship: _____

the attorney under a power of attorney given by the adult

Name: _____

Relationship: _____

the proxy under a health care directive made by the adult

Name: _____

Relationship: _____

the supporter nominated by the adult pursuant to section 9 of *The Personal Care Homes Regulations, 1996*

Name: _____

Relationship: _____

the person(s) who act(s) as trustee for the purpose of administering financial benefits on behalf of the adult

Name: _____

Relationship: _____

Name: _____

Relationship: _____

other: (*specify*) _____

(b) (*If applicable*) I seek an order stating that I am not required to serve the following persons:

NOTE: *The Adult Guardianship and Co-decision-making Act* provides that the court shall not dispense with service on the adult unless it is satisfied, on the basis of sufficient medical evidence, that special circumstances exist and service would be injurious to the adult and contrary to the best interests of the adult.

Name: _____

Relationship: _____

Name: _____

Relationship: _____

Name: _____

Relationship: _____

ADULT GUARDIANSHIP AND CO-DECISION-MAKING **A-5.3 REG 1**

4. Review

I request that the order include the following terms: *(check as appropriate)*

- that the order be reviewed by the court in _____ months
- that the order not be reviewed by the court

NOTE: *The Adult Guardianship and Co-decision-making Act* provides that the court shall determine whether it is in the best interests of the adult to require a review of the order, and if a review is required, shall specify the period within which the review is to take place.

4.1. Fees

I plan to charge a fee and seek:

- to receive the following fee for services: \$ _____
- or
- to charge fees as set out in the Regulations
- or
- I will not charge a fee

5. Documents Attached

The following documents are filed with the court as part of this application: *(check as appropriate)*

- court-certified or notarial copy of the last will and testament of the previous co-decision-maker or guardian of the adult
- court-certified copy of the order appointing a co-decision-maker or guardian for the adult
- proof of service of application on all persons required to be served
- affidavit of proposed co-decision-maker or guardian (*Form D*)
- consent(s) of nearest relative(s) to confirmation, if applicable without bond, of the testamentary nomination of the proposed co-decision-maker or guardian and affidavit(s) of execution with respect to the consent(s) (*Forms E and F*)
- bond undertaking to properly act as a co-decision-maker or guardian, if applicable (*where application is for the confirmation of a testamentary nomination as a property co-decision-maker or property guardian*) (*Form M*)
- other: *(describe)* _____

Dated at _____, _____, this _____ day of _____, 20 _____.

(Signature of Applicant)

Address for service: _____

Phone: _____ Fax: _____

E-mail: _____

Permanent address *(if different from address for service)*:

Phone: _____ Fax: _____

E-mail: _____

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FORM D
[Clause 3(d)]

In the King's Bench

Judicial Centre of _____

**Affidavit in Support of an Application for Confirmation of a Testamentary
Nomination (Appointment by Will)**I, _____, of _____, _____, MAKE
OATH AND SAY:

1. THAT I am the applicant and have personal knowledge of the matters deposed to in this affidavit, except where stated to be on information and belief, and where so stated I believe them to be true.
2. THAT I have been nominated in the will of _____, who died on _____, to act in that person's place as the _____ for _____ (the "adult"), and have been so acting since that person's death.
3. THAT I notified the public guardian and trustee of the above on _____ (where application is for the confirmation of a property co-decision-maker or property guardian).
4. THAT I am _____ years of age.
5. THAT I am the _____ (state relationship) of the adult.
6. THAT the nearest relative(s) of the adult, other than myself, is (are):

| Name | Address | Relationship |
|-------|---------|--------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

7. THAT the adult was born on _____, and is now _____ years of age.
8. THAT the adult currently resides at:
Address: _____
Phone: _____
9. THAT the current living arrangements of the adult, including the name, address and telephone number of any person, institution or agency providing ongoing support or primary care and assistance to the adult are:

10. THAT I believe the wishes of the adult are as follows: (attach written statement of adult's wishes, if available, including the adult's wishes with respect to whether the authority requested should be granted and whether the proposed co-decision-maker or guardian is acceptable to him or her; indicate date signed, if possible)

11. THAT I believe I would be a suitable _____ for the following reasons:

ADULT GUARDIANSHIP AND CO-DECISION-MAKING **A-5.3 REG 1**

12. THAT I (*check as appropriate*) have/ have not been appointed as a decision-maker for another person pursuant to *The Dependent Adults Act* or *The Adult Guardianship and Co-decision-making Act*.

Details, including name and address of adult, date of order, authority granted and fees for services received: (*if applicable*)

13. THAT I (*check as appropriate*) have/ have not been in a relationship of financial trust with another person, including under a power of attorney.

Details: (*if applicable*)

14. THAT I (*check as appropriate*) have/ have not been convicted of, or received a pardon for, a criminal offence relating to assault, sexual assault or other acts of violence, intimidation, criminal harassment, uttering threats, theft or fraud (*attach criminal record check completed by your local police service*).

Details: (*if applicable*)

15. THAT I (*check as appropriate*) have/ have not been a respondent pursuant to *The Victims of Domestic Violence Act* or a defendant pursuant to a section of the *Criminal Code* relating to securing a peace bond.

Details: (*if applicable*)

16. THAT I (*check as appropriate*) have/ have not applied for or been petitioned into bankruptcy.

Details, including the status or outcome of that application or petition: (*if applicable*)

17. THAT I am able to carry out my duties as _____ in a satisfactory manner, for the following reasons:

18. THAT my general plan with respect to the adult or the adult's estate is as follows:

(a) I plan to take the following actions: _____

A-5.3 REG 1 ADULT GUARDIANSHIP AND CO-DECISION-MAKING

(b) I plan to make the following decisions with respect to the adult's estate: _____

19. *(If applicable)* THAT I request an order dispensing with the requirement to file a bond pursuant to section 55 of *The Adult Guardianship and Co-decision-making Act* for the following reasons: *(where application is for the appointment of a property co-decision-maker or property guardian)* *(attach consent of nearest relative or public guardian and trustee, if applicable)*

20. *(If applicable)* THAT the reasons I seek an order stating that I am not required to serve the following persons are:

Name: _____

Relationship: _____

Reason for dispensing with service: _____

Name: _____

Relationship: _____

Reason for dispensing with service: _____

21. THAT attached are the following exhibits, marked A to _____, all of which I believe to be true copies of the originals: *(check as appropriate)*

written statement of the adult's wishes

other: *(describe)* _____

22. THAT no other application, other than the following, has been made to this court for the appointment or confirmation of a personal co-decision-maker, personal guardian, property co-decision-maker or property guardian for the adult, to the best of my information and belief:

23. THAT I am not aware of any conflict of interest that presently exists or will exist if I should be so confirmed.

23.1. THAT I understand that I must account annually to the court and the public guardian and trustee *(where application for the appointment of a property co-decision-maker or property guardian)*

ADULT GUARDIANSHIP AND CO-DECISION-MAKING A-5.3 REG 1

THAT I will undertake, on my appointment as co-decision-maker or guardian, to exercise the duties and powers assigned to me by the court diligently, in good faith and in the best interests of the adult. I will exercise my powers and duties in a way that encourages the adult to participate as fully as possible in decision-making and to act independently in all matters where he or she is able. I will protect the adult's civil and human rights and limit my interference in his or her life to the greatest extent possible.

THAT I make this affidavit in support of an application pursuant to *The Adult Guardianship and Co-decision-making Act* for an Order confirming me as the _____ for _____ .

RN before me at _____)
Saskatchewan, this _____ day)
_____, 20 _____)

(Signature of Applicant)

Commissioner for Oaths in and for Saskatchewan
Appointment expires _____

FORM E
[Clause 3(e)]

In the King's Bench

Judicial Centre of _____

**Consent by Nearest Relative to Appointment of a Co-decision-maker or Guardian or
to Confirmation of a Testamentary Nomination (Appointment by Will)**

I, _____, of _____, _____,
the _____ (state relationship) of the adult named in the application, consent to the
appointment or confirmation of _____ as:

- personal co-decision-maker for _____
- personal guardian for _____
- property co-decision-maker for _____ :
 - with a bond for \$ _____
 - without a bond
- property guardian for _____ :
 - with a bond for \$ _____
 - without a bond

Dated at _____, _____, this _____ day of _____, 20 _____.

(Witness)

(Signature of Consenting Nearest Relative)

Address for service: _____

Phone: _____ Fax: _____

E-mail: _____

Permanent address (if different from address for service):

Phone: _____ Fax: _____

E-mail: _____

FORM F
[Clause 3(f)]

In the King's Bench

Judicial Centre of _____

Affidavit of Execution

I, _____, (*print full name of witness*) of _____, _____,
MAKE OATH AND SAY:

1. THAT I was present and saw _____, who is personally known to me to be the person named in the "Consent by Nearest Relative to Appointment of a Co-decision-maker or Guardian or to Confirmation of a Testamentary Nomination" (*Form E*), duly sign and execute the same for the purposes named in that document.
2. THAT the same was executed at _____, _____, and that I am the subscribing witness.
3. THAT I know the said _____ and he/she is in my belief 18 years of age or more.

SWORN before me at _____)

Saskatchewan, this _____ day)

of _____, 20 _____)

(*Signature of Witness*)

A Commissioner for Oaths in and for Saskatchewan

My appointment expires _____

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FORM G
[Clause 3(g)]

In the King’s Bench

Judicial Centre of _____

Statement of Objection

NOTE: *The Adult Guardianship and Co-decision-making Act* requires the filing of this statement of objection within 10 days after the last person is served with an application for the appointment of a co-decision-maker or guardian.

I, _____, of _____, _____, object to the application for an Order for the appointment of _____ as _____ for (the “adult”) pursuant to *The Adult Guardianship and Co-decision-making Act*.

My relationship to the adult is that of _____.

The reasons for my objection are as follows:

Dated at _____, _____, this _____ day of _____, 20 _____.

(Signature of Objector)

Address for service: _____

Phone: _____ Fax: _____

E-mail: _____

Permanent address (if different from address for service):

Phone: _____ Fax: _____

E-mail: _____

FORM H
[Clause 3(h)]

In the King's Bench

Judicial Centre of _____

**Application for Appointment of a Temporary Personal
Guardian or Temporary Property Guardian**

1. I, _____, of _____, _____, apply to be appointed as: *(check as appropriate)*

temporary personal guardian for _____ for a period of _____ *(not to exceed six months)*, pursuant to section 19 of *The Adult Guardianship and Co-decision-making Act*

temporary property guardian for _____ or a period of _____ *(not to exceed six months)*, pursuant to section 44 of *The Adult Guardianship and Co-decision-making Act*

2. Personal Decision-Making Authority: *(where application is for the appointment of a temporary personal guardian)*

(a) I seek the authority to make the following decisions for the adult: *(check as appropriate)*

NOTE: *The Adult Guardianship and Co-decision-making Act* provides that the court shall restrict the authority of a temporary personal guardian to those matters mentioned in section 15 of the Act that are necessary to protect the adult from serious physical or mental harm.

decisions respecting the adult's living arrangements

decisions respecting access to the adult

decisions respecting the adult's social activities

decisions respecting the adult's employment

decisions respecting the adult's educational, vocational or other training

decisions respecting whether the adult should apply for any licence, permit, approval or other consent or authorization required by law that does not relate to the estate of the adult

decisions respecting legal proceedings that do not relate to the estate of the adult

decisions respecting the adult's health care, including decisions respecting admission to a health care facility or respecting treatment of the adult

decisions respecting the restraint of the adult

normal day-to-day decisions respecting the adult

other: *(specify)* _____

(b) I request that the following limitations, conditions or requirements apply to the authority requested: *(optional)*

A-5.3 REG 1 ADULT GUARDIANSHIP AND CO-DECISION-MAKING3. Property Decision-Making Authority: *(where application is for the appointment of a temporary property guardian)*

(a) I seek the authority to do only those things relating to the adult's estate that are necessary to protect the adult's estate from serious damage or loss and to provide the adult with the necessities of life.

(b) I specifically request the authority: *(check as appropriate)* to instruct any financial institution where the adult has an account that no funds are to be withdrawn from the account until further notice to direct any source of the adult's income to send the income to an account that is the subject of an instruction pursuant to the above item to stop any disposition of the adult's estate or direct that the proceeds of a disposition be paid into court other: *(specify)* _____(c) I request that the following limitations, conditions or requirements apply to the authority requested: *(optional)*

(d) with respect to the requirement for a bond *(if the application is for appointment of a temporary property guardian)* *(check as appropriate)*: I undertake to file a bond in the amount of \$ _____ pursuant to section 44 of the Act; or I will not file a bond because _____**NOTE: A bond is not required if the estate is valued below \$10,000.**

4. Service

I have served the following persons with all of the documents filed as part of this application: *(check as appropriate)* the adult with respect to whom the application is made the public guardian and trustee *(where application is for the appointment of a temporary property guardian)* other: *(specify)* _____

5. Review

I request that the order include the following terms: *(check as appropriate)* that the order be reviewed by the court in _____ months that the order not be reviewed by the court**NOTE: The Adult Guardianship and Co-decision-making Act provides that the court shall determine whether it is in the best interest of the adult to require a review of the order, and if a review is required, shall specify the period within which the review is to take place.**

5.1. Fees

I plan to charge a fee and seek:

 to receive the following fee for services: \$ _____

or

 to charge fees as set out in the Regulations

or

 I will not charge a fee

ADULT GUARDIANSHIP AND CO-DECISION-MAKING **A-5.3 REG 1**

6. Documents Attached

The following documents are filed with the court as part of this application: *(check as appropriate)*

- proof of service of application on all persons required to be served
- affidavit of proposed temporary guardian (*Form I*)
- other: *(describe)* _____

Dated at _____, _____, this _____ day of _____, 20 _____.

(Signature of Applicant)

Address for service: _____

Phone: _____ Fax: _____

E-mail: _____

Permanent address *(if different from address for service)*:

Phone: _____ Fax: _____

E-mail: _____

28 Jun 2002 SR 49/2002 s10; 16 Sep 2005 SR
96/2005 s4; 23 Sep 2011 SR 66/2011 s12; 3 May
2024 SR 30/2024 s4.

A-5.3 REG 1 ADULT GUARDIANSHIP AND CO-DECISION-MAKING

FORM I
[Clause 3(i)]

In the King’s Bench

Judicial Centre of _____

**Affidavit in Support of an Application for the Appointment
of a Temporary Personal Guardian or Temporary Property Guardian**

I, _____, of _____, _____, MAKE
OATH AND SAY:

1. THAT I am the applicant and have personal knowledge of the matters deposed to in this affidavit, except where stated to be on information and belief, and where so stated I believe them to be true.
2. THAT I am _____ years of age.
3. THAT I am the _____ (*state relationship*) of the adult named in the application (the “adult”).
4. THAT the nearest relative(s) of the adult, other than myself, is (are):

| Name | Address | Relationship |
|-------|---------|--------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

5. THAT the adult was born on _____, and is now _____ years of age.

6. THAT the adult currently resides at:

Address: _____

Phone: _____

7. THAT the current living arrangements of the adult, including the name, address and telephone number of any person, institution or agency providing ongoing support or primary care and assistance to the adult are:

8. THAT I believe the adult is in need of a temporary _____ guardian for the following reasons:
(*describe adult’s difficulty with decision-making and why an immediate appointment is necessary*)

9. THAT I believe I would be a suitable _____ guardian for the following reasons:
(*where the deponent is not the public guardian and trustee*)

10. THAT the adult’s property that is at risk is as follows: (*where application is for the appointment of a temporary property guardian*)

ADULT GUARDIANSHIP AND CO-DECISION-MAKING A-5.3 REG 1

11. THAT the adult's property is currently managed as follows: (where application is for the appointment of a temporary property guardian)

12. THAT no other application, other than the following, has been made to this court for the appointment of a temporary personal guardian or temporary property guardian for the adult, to the best of my information and belief:

13. THAT I am not aware of any conflict of interest that presently exists or will exist if I should be so appointed.

13.1. THAT I undertake to file a bond as required by the court.

14. THAT I will undertake, on my appointment as temporary guardian, to exercise the duties and powers assigned to me by the court diligently, in good faith and in the best interests of the adult. I will exercise my powers and duties in a way that encourages the adult to participate as fully as possible in decision-making and to act independently in all matters where he or she is able. I will protect the adult's civil and human rights and limit my interference in his or her life to the greatest extent possible.

15. THAT I make this affidavit in support of an application pursuant to *The Adult Guardianship and Co-decision-making Act* for an Order appointing me as temporary _____ guardian for _____ .

SWORN before me at _____)
Saskatchewan, this _____ day)
of _____ , 20 _____)

(Signature of Applicant)

A Commissioner for Oaths in and for Saskatchewan
My appointment expires _____

A-5.3 REG 1 ADULT GUARDIANSHIP AND CO-DECISION-MAKING

FORM J
[Clause 3(j) and Section 5]

In the King's Bench

Judicial Centre of _____

Affidavit re Assessment of Adult's Capacity

I, _____, of _____, _____,

MAKE OATH AND SAY:

1. THAT I am a _____ and have assessed the capacity
(occupation)

of _____ to make decisions with respect to:

personal matters

property matters

("Capacity" is defined in The Adult Guardianship and Co-decision-making Act as the ability:

(i) to understand information relevant to making a decision; and

(ii) to appreciate the reasonably foreseeable consequences of making or not making a decision.)

2. THAT the information contained in this assessment form is, to the best of my ability, true and accurate.

NOTE: The disclosure of personal health information is in accordance with subsection 5(4) of these regulations and may be disclosed by a trustee, in accordance with clause 27(4)(l) of The Health Information Protection Act, without the consent of the subject individual for the purpose of completing the assessment.

3. THAT my address and telephone number are as follows:

Address: _____

Phone: _____

4. THAT my qualifications are as follows:

5. THAT the reasons provided by the applicant to me for making this assessment are as follows:

(Describe the issues that have led to the assessment, e.g., financial mismanagement by the adult; medical or nutritional neglect; disorientation or wandering.)

6. THAT my personal relationship to and/or professional involvement with the adult is as follows:

ADULT GUARDIANSHIP AND CO-DECISION-MAKING **A-5.3 REG 1**

7. THAT in making this capacity assessment, I have followed the following process:
(Describe assessment tools or methods used, number of visits with adult, results of interviews with caregivers, other professional reports relied on, etc. You may attach copies of any reports or other documents supporting the assessment.)

8. THAT in my opinion the adult's decision-making ability is as follows: *(Describe the adult's decision-making ability and support required.)*

9. THAT I base my opinion on the following factors: *(Describe the evidence relating to the adult's decision-making ability on which you have based your decision.)*

10. THAT in my opinion the likelihood of change in the adult's decision-making ability is as follows: *(Include reasons.)*

11. THAT in my opinion the adult requires a personal co-decision-maker: *(If the application is for the appointment of a personal co-decision-maker or personal guardian, check as appropriate.)*

NOTE: A person requiring a personal co-decision-maker is a person whose capacity is impaired to the extent that he or she requires assistance in decision-making in order to make reasonable decisions with respect to the matters listed below.

- to assist in making decisions respecting the adult's living arrangements
- to assist in making decisions respecting access to the adult
- to assist in making decisions respecting the adult's social activities
- to assist in making decisions respecting the adult's employment
- to assist in making decisions respecting the adult's educational, vocational or other training
- to assist in making decisions respecting whether the adult should apply for any licence, permit, approval or other consent or authorization required by law that does not relate to the estate of the adult
- to assist in making decisions respecting legal proceedings that do not relate to the estate of the adult
- to assist in making decisions respecting the adult's health care, including decisions respecting admission to a health care facility or respecting treatment of the adult
- to assist in making decisions respecting the restraint of the adult
- to assist in making normal day-to-day decisions respecting the adult
- other: *(specify)* _____

A-5.3 REG 1 ADULT GUARDIANSHIP AND CO-DECISION-MAKING

12. THAT in my opinion the adult requires a personal guardian: *(If the application is for the appointment of a personal co-decision-maker or personal guardian, check as appropriate.)*

NOTE: A person requiring a personal guardian is a person whose capacity is impaired to the extent that he or she is unable to make reasonable decisions with respect to the matters listed below.

- to make decisions respecting the adult's living arrangements
- to make decisions respecting access to the adult
- to make decisions respecting the adult's social activities
- to make decisions respecting the adult's employment
- to make decisions respecting the adult's educational, vocational or other training
- to make decisions respecting whether the adult should apply for any licence, permit, approval or other consent or authorization required by law that does not relate to the estate of the adult
- to make decisions respecting legal proceedings that do not relate to the estate of the adult
- to make decisions respecting the adult's health care, including decisions respecting admission to a health care facility or respecting treatment of the adult

NOTE: A clear direction set out in a health care directive will take precedence over the decision of a personal guardian. As well, unless a court decides otherwise, the decision of a proxy appointed in a health care directive will take precedence over the decision of a personal guardian.

- to make decisions respecting the restraint of the adult
- to make normal day-to-day decisions respecting the adult
- other: *(specify)* _____

13. THAT I make the following recommendation respecting the adult's need for a personal co-decision-maker or personal guardian: *(Complete this section if the application is for the appointment of a personal co-decision-maker or personal guardian.)*

NOTE: *The Adult Guardianship and Co-decision-making Act* provides that the court shall not give the personal co-decision-maker or personal guardian the authority to act with respect to all the matters mentioned above if an order providing particular powers would be sufficient to meet the needs of the adult.

14. That in my opinion the adult: *(If the application is for the appointment of a property co-decision-maker or property guardian, check as appropriate.)*

NOTE: A person requiring a property co-decision-maker is a person whose capacity is impaired to the extent that he or she requires assistance in decision-making in order to make reasonable decisions with respect to matters relating to his or her estate. A person requiring a property guardian is a person whose capacity is impaired to the extent that he or she is unable to make reasonable decisions with respect to matters relating to his or her estate.

- requires a property co-decision-maker to assist in making decisions with respect to matters relating to his or her estate
- requires a property guardian to make decisions with respect to matters relating to his or her estate

15. THAT I make the following recommendation respecting the adult’s need for a property co-decision-maker or property guardian: *(Complete this section if the application is for the appointment of a property co-decision-maker or property guardian.)*

NOTE: *The Adult Guardianship and Co-decision-making Act* provides that the court shall consider whether an order appointing a property co-decision-maker or property guardian should be made subject to limitations, conditions or requirements, including limiting the authority of the property co-decision-maker or property guardian to decisions involving more than a certain dollar amount.

16. *(Optional)* THAT in my opinion, without the appointment I have recommended, the following consequences are likely to occur:

SWORN before me at _____, }
Saskatchewan, this _____ day }
of _____, 20 _____ }

(Signature of Assessor)

A Commissioner for Oaths in and for Saskatchewan
My appointment expires _____

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FORM K

[Clause 3(k)]

In the King's Bench

Judicial Centre of _____

Statement of Inventory re Application for Appointment of a Property Co-decision-maker Or Property Guardian

I, _____, of _____, _____,
MAKE OATH AND SAY THAT the information in this Statement of Inventory is true and complete to the best of my knowledge and belief, and sets out all of the assets and debts of _____
(name of adult)
as of _____
(date).

SWORN before me at _____)
Saskatchewan, this _____ day _____)
of _____, 20 _____)

(Signature of Applicant)

A Commissioner for Oaths in and for Saskatchewan
My appointment expires _____

NOTE: The inventory must be filed with the court and the Public Guardian and Trustee.

ASSETS OF THE ADULT

A. Financial Institution Accounts

| | Financial Institution | Account Number | Jointly Owned With (if applicable) | Value |
|----|-----------------------|----------------|---------------------------------------|--------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| | | | | Total Value: |

B. Term Deposits

| | Financial Institution | Interest Rate | Maturity Date | Jointly Owned With (if applicable) | Face Value |
|----|-----------------------|---------------|---------------|---------------------------------------|--------------|
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| | | | | | Total Value: |

C. Uncashed Cheques

| Issuer | Jointly Payable to <i>(if applicable)</i> | Value |
|--------|--|-------|
|--------|--|-------|

- 1.
- 2.
- 3.

Total Value:

D. Cash on Hand

Total Value:

E. Real Estate

| Legal description | Jointly Owned With: <i>(if applicable)</i> | Value |
|-------------------|---|-------|
|-------------------|---|-------|

- 1.
- 2.
- 3.

Total Value:

F. Stocks and Investment Funds

| Company | Number of Shares or Units | Jointly Owned With <i>(if applicable)</i> | Value |
|---------|---------------------------|--|-------|
|---------|---------------------------|--|-------|

- 1.
- 2.
- 3.

Total Value:

G. Bonds

| Issuer | Interest Rate | Maturity Date | Jointly Owned With <i>(if applicable)</i> | FaceValue |
|--------|---------------|---------------|--|-----------|
|--------|---------------|---------------|--|-----------|

- 1.
- 2.
- 3.

Total Value:

H. RRSP, RRIF

| Company | Description/Policy | Number Value |
|---------|--------------------|--------------|
|---------|--------------------|--------------|

- 1.
- 2.
- 3.

Total Value:

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I. Life Insurance (owned by the adult or where the adult is beneficiary)

| | Company | Description/Policy Number | Value |
|----|---------|---------------------------|--------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| | | | Total Value: |

J. Vehicles

| | Description | Jointly Owned With (if applicable) | Value |
|----|-------------|---------------------------------------|--------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| | | | Total Value: |

K. Other Personal Property

| | Description | Jointly Owned With (if applicable) | Value |
|----|-------------|---------------------------------------|--------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| | | | Total Value: |

TOTAL VALUE OF ABOVE-LISTED ASSETS (A+B+C+D+E+F+G+H+I+J+K):

L. Monthly Payments Received by the Adult (annuities, pensions, salary)

| | Paid By | Description | Jointly Owned With (if applicable) | Monthly Amount |
|----|---------|-------------|---------------------------------------|-----------------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| | | | | Total Monthly Amount: |

M. Funds Held in a Discretionary Trust for the Benefit of the Adult

| | Estate of | Trustee | Amount |
|----|-----------|---------|--------|
| 1. | | | |
| 2. | | | |
| 3. | | | |

DEBTS OF THE ADULT

A. Financial Institution Loans

| | Owing to | Description | Security Held, if any | Amount Owing |
|----|----------|-------------|-----------------------|---------------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| | | | | Total Amount Owing: |

B. Credit Cards

| | Owing to | Description | Amount Owing |
|----|----------|-------------|---------------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| | | | Total Amount Owing: |

C. Mortgages

| | Owing to | Description | Security Held, if any | Amount Owing |
|----|----------|-------------|-----------------------|---------------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| | | | | Total Amount Owing: |

D. Other Debts

| | Owing to | Description | Security Held, if any | Amount Owing: |
|----|----------|-------------|-----------------------|---------------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| | | | | Total Amount Owing: |

TOTAL AMOUNT OF ABOVE-LISTED DEBTS (A+B+C+D):

MONTHLY EXPENSES OF THE ADULT

| | |
|--------------------------|-----------------|
| Food | \$ _____ |
| Rent or mortgage payment | _____ |
| Utilities | _____ |
| Clothing | _____ |
| Medication | _____ |
| Transportation | _____ |
| Insurance | _____ |
| Incidentals | _____ |
| Other | _____ |
| Total | \$ _____ |

A-5.3 REG 1 ADULT GUARDIANSHIP AND CO-DECISION-MAKING

FORM L

[Clause 3(l)]

In the King's Bench

Judicial Centre of _____

Annual Accounting by Property Co-decision-maker or Property Guardian

I, _____, of _____, _____, MAKE OATH AND SAY:

- 1. THAT I am the _____ (*property co-decision-maker/property guardian*) for _____ (the "adult").
- 2. THAT the information set out in this Annual Accounting of the adult's property is true and complete to the best of my knowledge and belief, and is for the period from _____ to _____ (*period of accounting*).

SWORN before me at _____)
Saskatchewan, this _____ day)
of _____, 20 _____)

(*Signature of Property Co-decision-maker or Property Guardian*)

A Commissioner for Oaths in and for Saskatchewan
My appointment expires _____

A. Funds Received:

| | Date Received | Received From | Description | Amount |
|----|---------------|---------------|-------------|--------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |
| 7. | | | | |
| 8. | | | | |

Total Funds Received:

ADULT GUARDIANSHIP AND CO-DECISION-MAKING **A-5.3 REG 1****B. Funds Spent:**

| | Date Spent | Paid To | Description | Amount |
|----|------------|---------|-------------|--------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |
| 7. | | | | |
| 8. | | | | |

Total Funds Spent:

Attach statement of inventory (*Form K*) updated to the end of the accounting period.

16 Sep 2005 SR 96/2005 s4; 23 Sep 2011 SR
66/2011 s14; 3 May 2024 SR 30/2024 s4.

A-5.3 REG 1 ADULT GUARDIANSHIP AND CO-DECISION-MAKING

FORM L.1

[*Clause 3(l)*]

In the King's Bench

Judicial Centre of _____

Final Accounting by Property Co-decision-maker or Property Guardian

I, _____, of _____, _____, MAKE OATH AND SAY:

- 1. THAT I was the _____ (*type of guardian*)
for _____ between _____ and _____ .
(*adult's name*) (dates)
- 2. THAT the information set out in this Final Accounting of the adult's property is true and complete to the best of my knowledge and belief, and is for the period from _____ to _____ .
(*period of accounting*).

SWORN (OR DECLARED)

before me at _____)
Saskatchewan, this _____ day)
of _____, 20 _____)

(*Signature of Property Co-decision-maker
or Property Guardian*)

A Commissioner for Oaths in and for Saskatchewan

My appointment expires _____

A. Funds Received:

| | Date Received | Received From | Description | Amount |
|----|---------------|---------------|-------------|--------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |
| 7. | | | | |
| 8. | | | | |

Total Funds Received:

ADULT GUARDIANSHIP AND CO-DECISION-MAKING **A-5.3 REG 1****B. Funds Spent:**

| | Date Spent | Paid To | Description | Amount |
|----|------------|---------|-------------|--------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |
| 7. | | | | |
| 8. | | | | |

Total Funds Spent:

Attach statement of inventory (*Form K*) updated to the end of the accounting period.

A-5.3 REG 1 ADULT GUARDIANSHIP AND CO-DECISION-MAKING

Form M

[Clause 3(m)]

In the King's Bench

Judicial Centre of _____

Bond

We, _____ (*name of property co-decision-maker or property guardian*)
of _____, _____ (*address*), and _____ (*name of surety*)
of _____, _____ (*address*), are jointly and severally bound to a judge of the Court
of King's Bench for Saskatchewan at the Judicial Centre of _____ in the amount of
\$ _____, to be paid to the judge at that judicial centre.

The condition of this obligation is that if the above-named property co-decision-maker or property guardian of
the property of _____ (*adult's name*) does all of the following, then this obligation
shall be void, but otherwise shall be and remain in full force and effect:

- (a) make or cause to be made an accurate inventory of all the property of the adult that has or shall come into the possession or knowledge of the property co-decision-maker or property guardian, and provide the same to the local registrar of the Court of King's Bench at the Judicial Centre of _____ and to the public guardian and trustee whenever required by law to do so;
- (b) make or cause to be made an accurate annual accounting of all the property of the adult that has or shall come into the possession or knowledge of the property co-decision-maker or property guardian, and provide the same to the local registrar of the Court of King's Bench at the Judicial Centre of _____ and to the public guardian and trustee whenever required by law to do so;
- (c) well and truly administer according to law all the property of the adult that has or shall come into the possession or knowledge of the property co-decision-maker or property guardian.

Sealed with our seals and dated this _____ day of _____, 20_____.

Name: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

(*Signature of Property Co-decision-maker
or Property Guardian*)

Name: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

(*Signature of Surety*)

ADULT GUARDIANSHIP AND CO-DECISION-MAKING **A-5.3 REG 1**

Form M.1

[Clause 3(m.1)]

In the King's Bench

Judicial Centre of _____

Bond

We, _____ (*name of temporary property guardian*)
of _____, _____ (*address*), and _____ (*name of surety*)
of _____, _____ (*address*), are jointly and severally bound to a judge of the Court
of King's Bench for Saskatchewan at the Judicial Centre of _____ in the amount of
\$ _____, to be paid to the judge at that judicial centre.

The condition of this obligation is that if the above-named temporary property guardian of the property of

(*adult's name*)

well and truly administers according to all law all the property of the adult that has or shall come into the possession
or knowledge of the temporary property guardian, then this obligation shall be void, but otherwise shall be and remain
in full force and effect.

Sealed with our seals and dated this _____ day of _____, 20_____.

Name: _____

Address: _____

E-mail: _____

(*Signature of Temporary Property Guardian*)

Name: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

23 Sep 2011 SR 66/2011 s15; 3 May 2024 SR
30/2024 s4.

A-5.3 REG 1 ADULT GUARDIANSHIP AND CO-DECISION-MAKING

Form N

[Clause 3(n)]

In the King's Bench

Judicial Centre of _____

Order Appointing a Decision-maker

On the application of _____, and on hearing read the application and documents filed as part of and in support of the application, all filed:

The Court finds that _____ (the "adult"):

- (a) is a person whose capacity is impaired to the extent that the adult requires assistance in decision-making in order to make reasonable decisions with respect to some or all of the matters mentioned in section 15 of *The Adult Guardianship and Co-decision-making Act* (the "Act"), and is in need of a personal co-decision-maker;
- (b) is a person whose capacity is impaired to the extent that the adult is unable to make reasonable decisions with respect to some or all of the matters mentioned in section 15 of the Act, and is in need of a personal guardian;
- (c) is a person described in (a) or (b) above, and an immediate appointment of a temporary personal guardian is necessary to protect the adult from serious physical or mental harm;
- (d) is a person whose capacity is impaired to the extent that the adult requires assistance in decision-making in order to make reasonable decisions with respect to matters relating to his or her estate, and is in need of a property co-decision-maker;
- (e) is a person whose capacity is impaired to the extent that the adult is unable to make reasonable decisions with respect to matters relating to his or her estate, and is in need of a property guardian;
- (f) is a person described in (d) or (e) above, and an immediate appointment of a temporary property guardian is necessary to protect the adult's estate from serious damage or loss.

It is therefore ordered that: (*check as appropriate*)

1. _____ be appointed as _____ for _____ pursuant to section _____ of *The Adult Guardianship and Co-decision-making Act*, (*in the case of the appointment of a temporary personal or property guardian*) for a period of _____ months.
2. (*Where application is for the appointment of a personal co-decision-maker, personal guardian or temporary personal guardian*) The _____ shall have authority with respect to the following matters: (*check as appropriate*)
 - decisions respecting the adult's living arrangements
 - decisions respecting access to the adult
 - decisions respecting the adult's social activities
 - decisions respecting the adult's employment
 - decisions respecting the adult's educational, vocational or other training
 - decisions respecting whether the adult should apply for any licence, permit, approval or other consent or authorization required by law that does not relate to the estate of the adult

ADULT GUARDIANSHIP AND CO-DECISION-MAKING A-5.3 REG 1

- decisions respecting legal proceedings that do not relate to the estate of the adult
- decisions respecting the adult’s health care, including decisions respecting admission to a health care facility or respecting treatment of the adult
- decisions respecting the restraint of the adult
- normal day-to-day decisions respecting the adult
- other (*specify*) _____

(If applicable) subject to the following limitations, conditions or requirements:

3. (Where application is for the appointment of a property co-decision-maker, property guardian or temporary property guardian, and if applicable) The authority of the _____ is subject to the following limitations, conditions or requirements:

4. (If the application is for the appointment of a property co-decision-maker or property guardian)
 A bond in the amount of \$ _____ has been filed with the local registrar by _____ ;
 or
 No bond is to be filed.

5. (If applicable) Service of the application and/or order on the following persons is not required:

6. (If applicable) The _____ shall bring this order to be reviewed by the court in _____ months.

7. (If applicable) _____ shall receive payment of \$ _____ as a fee for services as _____ .

FORM O

[Clause 3(o)]

Notice of Authority of Property Decision-Maker

To the Registrar

_____ To the Registrar of Titles

Re: _____
(name of adult)

Pursuant to the provisions of section 57 of *The Adult Guardianship and Co-decision-making Act*, take notice that I am the property co-decision-maker, property guardian or temporary property guardian of the above named adult.

In my opinion, the adult has an interest in the following titles and interests: (*description*)

You are required to register this notice against all titles to land described in this notice.

Dated this _____ day of _____, 20_____.

(Signature of Property Co-decision-maker,
Property Guardian or Temporary Property Guardian)

Name: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

FORM P

[Clause 3(p)]

Withdrawal of Notice

To the Registrar

_____ To the Registrar of Titles

Re: _____
(name of adult)

NOTE: Where Notice is being withdrawn because the adult has died please attach a notarial copy of the adult’s death certificate or a court-certified copy of letters probate or letters of administration.

The Notice dated _____, 20 _____, and sent to you pursuant to section 57 of *The Adult Guardianship and Co-decision-making Act* with respect to the above named adult and registered in your office on the _____ day of _____, 20 _____, as No. _____ is withdrawn with respect to the following land: *(description)*

Dated this _____ day of _____, 20_____.

*(Signature of Property Co-decision-maker,
Property Guardian or Temporary Property Guardian)*

Name: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

A-5.3 REG 1 ADULT GUARDIANSHIP AND CO-DECISION-MAKING

FORM Q
[Clause 3(q)]
Amended Notice

To the Registrar

_____ To the Registrar of Titles

Re: _____
(name of adult)

The Notice dated _____, 20 ____ , and sent to you pursuant to section 57 of *The Adult Guardianship and Co-decision-making Act* with respect to the above-named adult and registered in your office on the _____ day of _____, 20 _____ , as No. _____ is amended as follows:

Dated this _____ day of _____, 20 _____.

(Signature of Property Co-decision-maker,
Property Guardian or Temporary Property Guardian)

Name: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

FORM Q.1

[Clause 3(q.1)]

Alternate Decision-Maker Assuming Role of Decision-Maker

To: Local Registrar and Public Guardian and Trustee

1. I, _____, of _____, in _____, pursuant to section 64.1 of *The Adult Guardianship and Co-decision-making Act*, acknowledge that I am the alternate decision-maker for _____ pursuant to the order of _____.
- (adult's name) (type of decision-maker)
2. That effective _____ I assumed the position of _____
- (date) (type of decision-maker)
- from _____ because I have only been advised and I do verily
- (first decision-maker)
- believe it to be true that (choose one):
- the current decision-maker is dead;
- a decision-maker has been ordered for the current decision-maker; or
- the current decision-maker lacks capacity and an enduring power of attorney or health care directive has come into effect.
3. I have filed a bond in the amount of _____ as required by the order of _____.
- (date of appointment order)

Dated at _____, _____, this _____ day of _____, 20 _____.

(Signature of Alternate Decision-maker)

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Form R

[Clause 3(r)]

In the King's Bench

Judicial Centre of _____

Application for Review

1. I, _____, of _____, _____, request the following relief: *(check as appropriate)*

review of the appointment of _____ as _____ for _____ pursuant to *The Dependent Adults Act* or *The Adult Guardianship and Co-decision-making Act*

review of the authority of _____ as _____ for _____

review of the confirmation of the testamentary nomination of _____ as _____ for _____ pursuant to *The Dependent Adults Act* or *The Adult Guardianship and Co-decision-making Act*

other: *(specify)* _____

2. An order was granted by this Court on _____, _____ :

appointing _____ as _____ for _____

confirming the testamentary nomination of _____ as _____ for _____

3. I ask this Court to make an order: *(check as appropriate)*

discharging _____ from office and appointing _____ as _____

changing the authority of _____ as follows:

- changing the amount of the bond filed as follows: _____

- changing the nature of the appointment from a _____ to a _____
(e.g. from a personal co-decision-maker to a personal guardian)
- other: (specify) _____

Service

NOTE: You must include the addresses of the persons listed below that have been served other than the Minister of Social Services and the public guardian and trustee.

(a) I have served the following persons with this petition: (check as appropriate)

- the adult with respect to whom the application is made
- the public guardian and trustee (where application is for the review of the appointment of a property co-decision-maker, property guardian or temporary property guardian)
- the nearest relatives
Name: _____
Relationship: _____
Name: _____
Relationship: _____
Name: _____
Relationship: _____
- the Minister of Social Services (where the adult is receiving services pursuant to section 10 or 56 of *The Child and Family Services Act*)
- the personal co-decision-maker, personal guardian or temporary personal guardian of the adult
Name: _____
Relationship: _____
- the property co-decision-maker, property guardian or temporary property guardian of the adult
Name: _____
Relationship: _____
- the attorney under a power of attorney given by the adult
Name: _____
Relationship: _____
- the proxy under a health care directive made by the adult
Name: _____
Relationship: _____

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the supporter nominated by the adult pursuant to section 9 of *The Personal Care Homes Regulations, 1996*

Name: _____

Relationship: _____

the person(s) who act(s) as trustee for the purpose of administering financial benefits on behalf of the adult

Name: _____

Relationship: _____

Name: _____

Relationship: _____

other: (*specify*) _____

(b) (*If applicable*) I seek an order stating that I am not required to serve the following persons:

NOTE: *The Adult Guardianship and Co-decision-making Act* provides that the court shall not dispense with service on the adult unless it is satisfied, on the basis of sufficient medical evidence, that special circumstances exist and service would be injurious to the adult and contrary to the best interests of the adult.

Name: _____

Relationship: _____

Reason for dispensing with service: _____

Name: _____

Relationship: _____

Reason for dispensing with service: _____

Name: _____

Relationship: _____

Reason for dispensing with service: _____

5. Summary of Facts

I request that the order be reviewed for the following reasons:

ADULT GUARDIANSHIP AND CO-DECISION-MAKING **A-5.3 REG 1**

- the supporter nominated by the adult pursuant to section 9 of *The Personal Care Homes Regulations, 1996*
 Name: _____
 Relationship: _____
- the person(s) who act(s) as trustee for the purpose of administering financial benefits on behalf of the adult
 Name: _____
 Relationship: _____
 Name: _____
 Relationship: _____
- other: (*specify*) _____

(b) (*If applicable*) I seek an order stating that I am not required to serve the following persons:

NOTE: *The Adult Guardianship and Co-decision-making Act* provides that the court shall not dispense with service on the adult unless it is satisfied, on the basis of sufficient medical evidence, that special circumstances exist and service would be injurious to the adult and contrary to the best interests of the adult.

Name: _____

Relationship: _____

Reason for dispensing with service: _____

Name: _____

Relationship: _____

Reason for dispensing with service: _____

Name: _____

Relationship: _____

Reason for dispensing with service: _____

A-5.3 REG 1 ADULT GUARDIANSHIP AND CO-DECISION-MAKING

Form S

[Clause 3(s)]

In the King's Bench

Judicial Centre of _____

Application for Resealing a Foreign Order

1. I, _____, of _____, _____, apply for resealing of a foreign order to appoint _____ as:

(applicant/guardian)

(check as appropriate)

- personal co-decision-maker for _____ pursuant to section 14 of *The Adult Guardianship and Co-decision-making Act*
- personal guardian for _____ pursuant to section 14 of *The Adult Guardianship and Co-decision-making Act*
- property co-decision-maker for _____ pursuant to section 40 of *The Adult Guardianship and Co-decision-making Act*
- with a bond for \$ _____
- without a bond for _____
- property guardian for _____ pursuant to section 40 of *The Adult Guardianship and Co-decision-making Act*
- with a bond for \$ _____
- without a bond for _____

2. On or about _____ the _____ court found that _____ was in need of a personal/property guardian or co-decision-maker (or whatever the term is in the foreign jurisdiction).

(date)

(adult's name)

3. The court named _____ of _____ in _____ as _____.

(applicant)

(city)

(province/country)

(type of guardian)

4. I am seeking to reseal the order of _____ because:
- the adult has property in Saskatchewan;
- the adult has moved to Saskatchewan.

5. With respect to the requirement to file a bond (choose one):

- I was required by the _____ to give security in the sum of \$ _____, and this amount is sufficient to cover the assets within that jurisdiction and within Saskatchewan;
- I undertake to file a bond in the amount of \$ _____ pursuant to section 65.2 of *The Adult Guardianship and Co-decision-making Act* (see Form M)
- the adult's assets do not exceed \$10,000.

(court of the other jurisdiction)

6. Service

NOTE: You must include the addresses of the persons listed below that have been served other than the Minister of Social Services and the Public Guardian and Trustee.

(a) I have served the following persons with a copy of the application and a copy of the foreign order (check as appropriate):

- the adult with respect to whom the application is made
- the Public Guardian and Trustee (*where application is for the appointment of a property co-decision-maker or property guardian*)
- the nearest relatives
 Name: _____
 Relationship: _____
 Name: _____
 Relationship: _____
 Name: _____
 Relationship: _____
- the Minister of Social Services (*where the adult is receiving services pursuant to section 10 or 56 of The Child and Family Services Act*)
- the personal co-decision-maker, personal guardian or temporary personal guardian of the adult
 Name: _____
 Relationship: _____
- the property co-decision-maker, property guardian or temporary property guardian of the adult
 Name: _____
 Relationship: _____
- the attorney under a power of attorney given by the adult
 Name: _____
 Relationship: _____
- the proxy under a health care directive made by the adult
 Name: _____
 Relationship: _____
- the supporter nominated by the adult pursuant to section 9 of *The Personal Care Homes Regulations, 1996*
 Name: _____
 Relationship: _____
- the person(s) who act(s) as trustee for the purpose of administering financial benefits on behalf of the adult
 Name: _____
 Relationship: _____
 Name: _____
 Relationship: _____

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other: (specify) _____

(b) (If applicable) I seek an order stating that I am not required to serve the following persons:

NOTE: The Adult Guardianship and Co-decision-making Act, 2011 provides that the court shall not dispense with service on the adult unless it is satisfied, on the basis of sufficient medical evidence, that special circumstances exist and service would be injurious to the adult and contrary to the best interests of the adult.

Name: _____

Relationship: _____

Name: _____

Relationship: _____

Name: _____

Relationship: _____

5. Summary of Facts

I request that the order be reviewed for the following reasons:

7. Review

I request that the order include the following terms: (check as appropriate)

that the order be reviewed by the court in _____ months;

NOTE: The Adult Guardianship and Co-decision-making Act provides that the court shall determine whether it is in the best interests of the adult to require a review of the order, and if a review is required, shall specify the period within which the review is to take place.

that the order be reviewed by the court

8. Fees

I plan to charge a fee and seek

to receive the following fee for services: \$ _____

or

to charge fees as set out in the Regulations

or

I will not charge a fee

9. Documents Attached

I will not charge a fee

The following documents are filed with the court as part of this application: (check as appropriate)

proof of service of application on all persons required to be served.

affidavit of the applicant.

inventory of the estate of the adult (where application is for the appointment of a property co-decision-maker or property guardian) (see Form K).

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the foreign order to be resealed.

certificate from the clerk/registrar of the court outside Saskatchewan that the foreign order is wholly unrevoked and of full effect.

bond undertaking to properly act as a co-decision-maker or guardian (*where application is for resealing of a foreign order appointing a property guardian*) or a certificate from the clerk or registrar of the court in _____
(*province/country*)

stating that security has been given in that court in an amount sufficient to cover assets in Saskatchewan.

other: (*describe*) _____

Dated at _____, _____, this _____ day of _____, 20 _____.

(*Signature of Applicant*)

Address for service: _____

Phone: _____ Fax: _____

E-mail: _____

Permanent address (*if different from address for service*):

Phone: _____ Fax: _____

E-mail: _____

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Form T

[Clause 3(t)]

In the King's Bench

Judicial Centre of _____

Affidavit in Support of an Application to Reseal a Foreign Order

I, _____, of _____, _____,

MAKE OATH AND SAY (OR DECLARE):

1. THAT I am the applicant and have personal knowledge of the matters deposed to in this affidavit, except where stated to be on information and belief, and where so stated I believe them to be true.
2. Attached as Exhibit "A" is a copy of my application in the _____
(court of other jurisdiction) for the order I am seeking to have resealed.
3. Attached as Exhibit "B" is a certified copy of the original guardianship order issued by the _____
(court) of _____
(province/country).
4. Attached as Exhibit "C" is a certificate from the _____
(court) of _____
(province/country) showing that the order of _____
(date) is wholly unrevoked and of full effect.
5. Attached as Exhibit "D" is a certificate from the _____
(court) of _____
(province/country) stating that security has been given in that court in an amount sufficient to cover assets within Saskatchewan.
6. THAT I am the _____
(state relationship) of the adult named in the application (the "adult").
7. THAT the nearest relative(s) of the adult, other than myself, is (are):

| Name | Address | Relationship |
|-------|---------|--------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

8. THAT the adult was born on _____, and is now _____ years of age.

9. THAT the adult currently resides at:

Address: _____
Phone: _____

10. THAT I believe I would be a suitable _____ for the following reasons
(where the deponent is not the Public Guardian and Trustee)

11. THAT I *(check as appropriate)* have / have not been appointed as a decision-maker for another person pursuant to *The Dependent Adults Act* or *The Adult Guardianship and Co-decision-making Act* *(where the deponent is not the public guardian and trustee)*.

Details, including name and address of adult, date of order, authority granted and fees for services received *(if applicable)*:

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12. THAT I (check as appropriate) have / have not been in a relationship of financial trust with another person, including under a power of attorney.

Details, (if applicable):

13. THAT I (check as appropriate) have / have not been convicted of, or received a pardon for, a criminal offence relating to assault, sexual assault or other acts of violence, intimidation, criminal harassment, uttering threats, theft or fraud.

NOTE: Attach a copy of a criminal record check completed by your local police service.

Details, (if applicable):

14. THAT I (check as appropriate) have / have not been a respondent pursuant to *The Victims of Domestic Violence Act* or a defendant pursuant to a section of the *Criminal Code* relating to securing a peace bond.

Details, (if applicable):

15. THAT I (check as appropriate) have / have not been petitioned into bankruptcy.

Details, including the status or outcome of that application or petition: (if applicable)

16. THAT the estimated value of the adult's estate is as follows: (where application is for the appointment of a property co-decision-maker or property guardian)

17. (If applicable) THAT the reasons I seek an order stating that I am not required to serve the following persons are:

Name: _____

Relationship: _____

Reason for dispensing with service: _____

Name: _____

Relationship: _____

Reason for dispensing with service: _____

NOTE: *The Adult Guardianship and Co-decision-making Act, 2011* provides that the court shall not dispense with service on the adult unless it is satisfied, on the basis of sufficient medical evidence, that special circumstances exist and service would be injurious to the adult and contrary to the best interests of the adult.

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18. THAT attached are the following exhibits, marked E to _____, all of which I believe to be true copies of the originals: *(check as appropriate)*

- power of attorney given by the adult *(where order appointing property co-decision-maker or property guardian is requested)*
- health care directive made by the adult *(where order appointing personal co-decision-maker or personal guardian with authority respecting health care decisions is requested)*
- last will and testament made by the adult *(where order appointing property co-decision-maker or property guardian is requested)*
- other: *(describe)* _____

19. THAT no other application, other than the following, has been made to this court for the appointment of a personal co-decision-maker, personal guardian, property co-decision-maker or property guardian for the adult, to the best of my information and belief:

20. THAT I am not aware of any conflict of interest that presently exists or will exist if I should be so appointed.

21. THAT I understand that I must account annually to the court and the Public Guardian and Trustee *(where application for the appointment of a property co-decision-maker or property guardian)*.

22. THAT I will undertake, on my appointment as co-decision-maker or guardian, to exercise the duties and powers assigned to me by the court diligently, in good faith and in the best interests of the adult. I will exercise my powers and duties in a way that encourages the adult to participate as fully as possible in decision-making and to act independently in all matters where he or she is able. I will protect the adult's civil and human rights and limit my interference in his or her life to the greatest extent possible.

23. THAT I make this affidavit in support of an application pursuant to *The Adult Guardianship and Co-decision-making Act* for an Order resealing the order of _____ of _____
(date) *(court)*
 of _____ appointing me as the _____
(province/country)
 for _____
(adult's name)

SWORN (OR DECLARED)

before me at _____)

Saskatchewan, this _____ day)

of _____, 20 _____)

(Signature of Applicant)

 A Commissioner for Oaths in and for Saskatchewan

My appointment expires _____

