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- Instructions:**
- 1) A person to be appointed as a guardian of a person with intellectual disability may use this form to accept the appointment by the court and agree to carry out the duties of a guardian as listed below.
 - 2) In addition to the list below, the proposed guardian should review (a) C.G.S. sections 45a-669 to 45a-683; (b) the Probate Court Rules of Procedure, rule 43; and (c) the Probate Court User Guide -- Persons with Intellectual Disability.
 - 3) If an individual fiduciary is not a Connecticut resident, a PC-482, Appointment of Probate Judge as Agent for Service by Non-resident Fiduciary, must also be filed in court.
 - 4) Type or print in ink. Use an additional sheet, or PC-180, if more space is needed.

Probate Court Name

District Number

In the Matter of

Hereinafter referred to as the protected person

ACCEPTANCE OF TRUST

By signing below, I accept the appointment as guardian of the protected person.

I am not a Connecticut resident and have submitted to the court a PC-482, Appointment of Probate Judge as Agent for Service by Non-resident Fiduciary.

AGREEMENT OF GUARDIAN OF PERSON WITH INTELLECTUAL DISABILITY

As guardian of the protected person, I acknowledge the following responsibilities and agree to:

- Carry out the duties and authorities granted to me by the court's decree of appointment.
- Submit a Guardian's Report/Guardianship of Person with Intellectual Disability, PC-771, every year to report on the condition of the protected person.
- Notify the court if there is a significant event affecting the protected person that occurs between the filings of the annual reports.
- Notify the court of any change of address of the protected person, my address, or the address of other parties interested in the guardianship. I will also immediately notify the court if the protected person dies.
- Read the Probate Court User Guide -- Persons with Intellectual Disability in its entirety, which I understand is available online at ctprobate.gov or from the court.
- I understand that I may be subject to a criminal background check pursuant to section 43.1 of the Probate Court Rules of Procedure.
- I understand that failure to comply with these conditions may result in a court hearing to determine whether or not I may continue as guardian.

The representations made in this agreement are made under penalty of false statement.

Signature		Signature	
Type or Print Name		Type or Print Name	
Date		Date	
Address		Address	
Telephone Number		Telephone Number	