

Case No. _____

4. Is the petitioner mentally competent? _____ Yes _____ No

Comments _____

5. Is the petitioner physically impaired? _____ Yes _____ No

6. Is there observed/reported evidence of physical infirmity? _____ Yes _____ No

If Yes, describe _____

7. If the petitioner is physically impaired, what is the cause? _____

8. Can the petitioner conduct business without the aid of a conservator?

_____ Yes _____ No Comments _____

9. Can the petitioner properly care for himself/herself without the aid of a conservator?

_____ Yes _____ No Comments _____

ADDITIONAL COMMENTS

I hereby certify that I/We have evaluated the petitioner on the _____ day of _____, 20 _____,
for the purpose of a conservatorship.

Date

Evaluator