	vistrict Court Denver Probate Court			
Cou	rt Address:			
In ti	ne Interest of:			
		▲ COURT USE ONLY ▲		
Min	or rney or Party Without Attorney (Name and Address):	Case Number:		
Allo	mey of Faity Willout Attorney (Name and Address).	Case Number.		
Pho	ne Number: E-mail:			
FAX	Number: Atty. Reg. #:	Division Courtroom		
	PETITION FOR CONFIRMATION OF APPOINTING PURSUANT TO § 15-14-202(6),			
I,	(name of appoint man as guardian and state the following:	ted guardian), hereby petition the court		
	The Affidavit of Acceptance of Appointment by Written Instrument as Guardian for Minor Pursuant to § 15-14-202, C.R.S. (JDF 821) was filed with the court on (date) and this petition is filed within 30 calendar days from said filing date.			
2.	The minor, if 12 years of age or older, □has or □has not conser and the verified Consent or Nomination of Minor (JDF 826) has been			
3.	The appointed guardian believes that the confirmation is in the bes	t interest of the minor.		
4.	This petition and the Affidavit of Acceptance of Appointment (JDI persons (all applicable must be given notice):	= 821) has been given to the following		
	☐ Appointing parent or guardian, if living.			
	☐ All adults with whom the minor is currently residing.☐ All adults who had care and custody of the minor in the last 60 of the minor in the minor in the last 60 of the minor in the	lovo		
	The minor, if 12 years of age or older.	lays.		
5.	Regarding the Indian Child Welfare Act (ICWA):			
	I am aware of the child or child's relatives having American India heritage.	an/Native American or Alaska Native		
	Name of tribe(s)			
	NOTE: If you checked that you are aware of the child or child's relat American or Alaska Native heritage, you must complete and file welfare Act (ICWA) Assessment Form.			
	☐I am not aware of the child or child's relatives having any Americ Native heritage.	can Indian/Native American or Alaska		
	NOTE: If you checked that you are not aware of the child or child's Indian/Native American or Alaska Native heritage, you must comple Alaska Native Indian Child Welfare Act (ICWA) Declaration of Non-	te and file JDF 1351 - American Indian/		
Ву	checking this box, I am acknowledging I am filling in the blanks and not char	nging anything else on the form.		
	checking this box, I am acknowledging that I have made a change to the ori			

VERIFICATION

Executed on the day of (date)		Executed on the day (date)	Executed on the day of (date)		
(month)	,	(month)	(year)		
at (city or other location	, and state OR count	ry) at (city or other location, and	state OR country)		
(printed name)		(printed name)			
(Signature of Petition	er)	(Signature of Co-Petitioner	(Signature of Co-Petitioner, if any)		
Attorney Signature, (i	f any)	Date			
I certify that on as follows on each of		CERTIFICATE OF SERVICE late), a copy of this (na	me of document) was se		
	and Address	Relationship to Decedent, Ward, or Protected Person	Manner of Service		
Insert one of the follo	owing: hand delivery	r, first-class mail, certified mail, e-service, o	or fax.		