

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO <input type="checkbox"/> CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101 <input type="checkbox"/> CENTRAL DIVISION, COUNTY COURTHOUSE, 220 W. BROADWAY, SAN DIEGO, CA 92101 <input type="checkbox"/> CENTRAL DIVISION, JUVENILE COURT, 2851 MEADOW LARK DR., SAN DIEGO, CA 92123 <input type="checkbox"/> EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020 <input type="checkbox"/> NORTH COUNTY DIVISION, 325 S. MELROSE DR., SUITE 130, VISTA, CA 92081 <input type="checkbox"/> SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	
GUARDIANSHIP OF THE PERSON OF (name): <div style="text-align: right;">A MINOR</div>	
ORDER FOR TERMINATION OF GUARDIANSHIP	CASE NUMBER

1. The Petition for Termination of Guardianship was heard as follows:

a. Judge (*name*):

b. Hearing Date: _____ Time: _____ Dept.: _____ Div.: _____ Room: _____

(Check boxes to indicate presence)

c. Petitioner (*name*):

d. Attorney for petitioner (*name*):

e. Attorney for child (*name, address and telephone*):

2. THE COURT FINDS

a. All notices required by law have been given.

b. The guardianship of the person of _____ is no longer necessary.

c. Termination of the guardianship is in the best interests of the child.

3. **THE COURT ORDERS** that the guardianship of the person named above is terminated effective _____.

Date: _____

Judge/Referee of the Superior Court