

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

IN THE INTEREST OF

Amended

Name

**Resignation of Guardian
 (§48.9795, Wis. Stats.)**

Date of Birth

Case No. _____

I am the Full Limited Temporary Emergency guardian of the above-named child.

I resign for the following reason(s):

I request that the court accept my resignation.

I understand that I will not be discharged by the court as guardian until the court finds that I have:

- completed all required duties;
- filed any required documents;
- a successor guardian is appointed, if needed, and
- the court issues an Order of Discharge.

Guardian

Name Printed or Typed

Address

Email Address

Telephone Number

Date

DISTRIBUTION:

1. Court
2. Child – if 12 years or older
3. Child's Parents
4. Child's Legal Custodian
5. Child's Guardian ad Litem/Adversary Counsel
6. Tribe (if any)
7. Indian Custodian (if any)
8. Additional Interested Persons (if any)