

STATE OF WISCONSIN, CIRCUIT COURT, \_\_\_\_\_ COUNTY

IN THE MATTER OF

Amended

\_\_\_\_\_  
Name

**Order and Notice for Hearing on Petition Objecting  
to Transfer of Protective Placement**

\_\_\_\_\_  
Date of Birth

Case No. \_\_\_\_\_

A Petition Objecting to Transfer of Protective Placement has been filed by [Name] \_\_\_\_\_.  
A hearing must be held **within 10 days** of the filing date of the Petition.

**THE COURT ORDERS:**

The Petition be heard before:

**NOTICE OF HEARING**

Date	Time	Location (Include Room Number)
Court Official		

If you require reasonable accommodations due to a disability to participate in the court process, please call \_\_\_\_\_  
prior to the scheduled court date. Please note that the court does not provide transportation.

**DISTRIBUTION:**

1. Court
2. Individual/Ward
3. Individual/Ward's Guardian
4. Corporation Counsel
5. Individual/Ward's Legal Counsel
6. Guardian ad litem
7. Individual/Ward's agent under Power of Attorney for Health Care
8. Facility in which the Individual resides
9. County Department of Human Services/Social Worker