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STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

IN THE MATTER OF

☐ Amended

Name

**Resignation of Guardian or Conservator
(Adult Guardianship and Conservatorship)**

Date of Birth

Case No. _____

I am the ☐ Guardian of Person
☐ Guardian of Estate
☐ Conservator
of the above-named individual.

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 of the person** until the court finds that I have:

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

☐ **guardian of the estate or conservator of the estate** until the court finds that I have:

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

I further understand that I will not be discharged by the court until my final account has been approved and a receipt from the successor guardian, successor conservator, or individual for all assets has been filed.

Guardian or Conservator

Name Printed or Typed

Address

Email Address

Telephone Number

Date