

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Probate Court _____ County, Colorado Court Address: _____ In the Interest of: Respondent	▲ COURT USE ONLY ▲
Attorney or Party Without Attorney (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number: _____ Division _____ Courtroom _____
NOTICE OF HEARING TO RESPONDENT (ADULT OR MINOR)	

To Respondent:

A hearing on the following Petition will be held at the following date, time and location.

Date: _____ **Time:** _____ **Courtroom or Division:** _____

Address: _____

- | | |
|--|---|
| <input type="checkbox"/> Petition for Appointment of Guardian | <input type="checkbox"/> Adult <input type="checkbox"/> Minor |
| <input type="checkbox"/> Petition for Appointment of Conservator | <input type="checkbox"/> Adult <input type="checkbox"/> Minor |

******* IMPORTANT NOTICE TO ADULT RESPONDENTS*******

The outcome of this proceeding may limit or completely take away your right to make decisions about your personal affairs or your financial affairs or both. You must appear in person unless excused by the Court. The petitioner is required to make reasonable efforts to help you attend the hearing.

You have the right to be represented by an attorney of your choice at your own expense. If you cannot afford an attorney, one may be appointed for you at State expense. You may request a professional evaluation of your condition. You have the right to present evidence and subpoena witnesses and documents; examine witnesses, including any court-appointed physician, psychologist, or other qualified individual providing evaluations, and the court visitor; and to otherwise participate in the hearing. You may ask that the hearing be held in a manner that reasonably accommodates you. You have the right to request that the hearing be closed, but the hearing may not be closed over your objection.

Signature of Person Giving Notice or Attorney

Note:

- ◆ This Notice of Hearing to Respondent must be personally served on the Respondent (12 years of age or older), along with a copy of the Petition, at least ten business days prior to the hearing pursuant to §15-14-309(1), C.R.S. or §15-14-404(1), C.R.S.
- ◆ Do not attach copies of the Petition when filing the Notice of Hearing to Respondent with Personal Service Affidavit with the Court.

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Attorney or Party Without Attorney (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number: _____ Division Courtroom	
PERSONAL SERVICE AFFIDAVIT		

I declare under oath that I am 18 years or older and not a party to the action and that I served a copy of the Notice of Hearing to Respondent and a copy of the Petition on the Respondent identified above in _____ (name of County/State) on _____ (date) at _____ (time) at the following location: _____, by handing the documents to a person identified to me as the Respondent in this case.

Signature of Process Server

Name (Print or type)

The foregoing instrument was acknowledged before me in the County of _____, State of Colorado, this _____ day of _____, 20 _____, by _____.

My Commission Expires: _____

Notary Public/Deputy Clerk