

**SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE**

- MURRIETA** 30755-D Auld Rd., Murrieta, CA 92563  
 **PALM SPRINGS** 3255 E. Tahquitz Canyon Wy., Palm Springs, CA 92262

- RIVERSIDE** 4050 Main St., Riverside, CA 92501

**RI-PR111**

<small>ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar Number and Address)</small>		<small>FOR COURT USE ONLY</small>  <b>CONFIDENTIAL</b>
<small>TELEPHONE NO.:</small> _____ <small>FAX NO. (Optional):</small> _____		<small>CASE NUMBER:</small> _____
<small>E-MAIL ADDRESS (Optional):</small> _____		
<small>ATTORNEY FOR (Name):</small> _____		
<b>IN THE MATTER OF:</b>		<small>Department:</small> _____
<small>Hearing Date:</small> _____	<small>Time:</small> _____	
<b>NOMINATION OF JOINT GUARDIAN FORM GC-210(P) – ATTACHMENT 10c(1)</b>		

1. My name is: \_\_\_\_\_ .
2. I am a parent who has custody of my child (*name*): \_\_\_\_\_ .
3. I nominate the following person(s) as joint guardian of the person of my child:
  - a. (*Name*): \_\_\_\_\_  
(*Address*): \_\_\_\_\_  
(*Phone*): \_\_\_\_\_  
(*Email*): \_\_\_\_\_
  - b. (*Name*): \_\_\_\_\_  
(*Address*): \_\_\_\_\_  
(*Phone*): \_\_\_\_\_  
(*Email*): \_\_\_\_\_
4. This nomination will be effective (*Complete either (a) or (b)*):
  - a.  Immediately
  - b.  If I become unavailable due to (*check all that apply*)
    - (1)  A serious medical condition or disability
    - (2)  Military service
    - (3)  Incarceration
    - (4)  Deportation or immigration-related detention
    - (5)  Death
    - (6)  Other (*specify*): \_\_\_\_\_

IN THE MATTER OF:	CASE NUMBER:
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5. Tribal Membership Status (*Complete either (a) or (b)*):

- a.  **Non-Tribal Status:** Neither I, the other parent, or the child are members are eligible for membership in a federally-recognized Indian tribe.
- b.  **Tribal Status:**  I am,  the other parent is, and/or  my child is a member or eligible for membership in a federally-recognized Indian tribe. I signed this consent at least 10 days after the child's birth before the judge indicated below.

**Judicial Certification under Probate Code 1500.1:** This nomination was signed before:

Judge (*name*): \_\_\_\_\_

Court (*name*): \_\_\_\_\_

The judge certifies by the signature below that the terms and consequences of the consent were fully explained in detail and fully understood

- in English
- through an interpreter in (*language*): \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
(SIGNATURE OF JUDGE)

6. Status of the other parent (*Select one*):

- a.  Deceased
- b.  Lacks legal capacity
- c.  Parental rights have been terminated by a court
- d.  Consents to this nomination
- e.  Consent status in unknown

Date: \_\_\_\_\_

\_\_\_\_\_  
(SIGNATURE OF NOMINATING PARENT)

\_\_\_\_\_  
(TYPED NAME OF NOMINATING PARENT)