

**ANNUAL REPORT OF  
GUARDIAN OF MINOR**

Docket No.

Assigned by Court  
↓

Commonwealth of Massachusetts  
The Trial Court  
Probate and Family Court

In the Interests of:

Wally Adam Ward  
First Name Middle Name Last Name

Suffolk Division

Minor

Child's name, date of birth and address:

Wally Adam Ward 11/5/98  
First Name Middle Name Last Name (Date of Birth)  
123 Main Street 2 Boston MA 02111  
(Address) (Apt, Unit, No. etc.) (City/Town) (State) (Zip)

Each guardian's name and address:

1. Gretchen L. Guardian  
First Name M.I. Last Name  
123 Main Street 2 Boston MA 02111  
(Address) (Apt, Unit, No. etc.) (City/Town) (State) (Zip)

1. Please list the names, ages and relationship to you of all persons currently living in your household:

	First Name	M.I.	Last Name	Age	Relationship
1.	Robert	T.	Smith	65	Boyfriend
2.	Samantha	R.	Jones	40	Niece
3.					
4.					
5.					
6.					

2. Have you been investigated for abuse or neglect since the last report or since you were in court?  Yes  No

If YES, please state the date(s), circumstances, investigating agency, outcome and any information regarding court involvement such as the name of the court and docket number of the case:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Has the child moved since your last report or since you were last in court?  Yes  No

If YES, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Is the child currently in school?

Yes  No

If **NO**, and the child is over age 6, please explain:

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If **YES**, please answer the following:

What grade is the child in? 9th

How is the child doing in school? Please describe the child's grades and any special services the child is receiving in school:

Wally is doing well. He received 3 Cs, 2 Bs, and a D in geometry. He has started staying late after school to get additional help in geometry from his teacher, and his grades on recent tests are starting to improve.

5. Has the child's physical, psychological or medical condition changed since the last report?  
Has he/she been hospitalized or injured?

Yes  No

If **YES**, please explain:

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6. Does the child have contact with his or her parent(s)?

Yes  No

If **YES**, how frequently, how recently, is it regular, and what is the quality of the contact?

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7. Has the child been involved in any court cases since the last report or since you were last in court? For example - delinquency or criminal charges, CHINS petition?

Yes  No

If **YES**, please explain:

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8. Please provide any other information you believe will assist the court in reviewing the child's general well being. (Attach additional pages if needed)

Wally helps out around the house. He is looking forward to getting his learners' permit soon. He has a lot of friends and is very social, but I make sure his schodwork comes first.

**SIGNED UNDER THE PENALTIES OF PERJURY**

I affirm or swear under oath that I have read the foregoing petition and that the statements set forth therein are true and correct to the best of my knowledge.

Date May 24, 2013

Gretchen L. Guardian  
Signature of Guardian

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Co-Guardian (if applicable)

Attorney for Guardian:

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
(Address) (Apt, Unit, No. etc.)

\_\_\_\_\_  
(City/Town) (State) (Zip)

Primary Phone #: \_\_\_\_\_

BBO No.: \_\_\_\_\_