

Your Name: \_\_\_\_\_  
Your Address: \_\_\_\_\_  
Your City, Zip Code: \_\_\_\_\_  
Your Telephone No. \_\_\_\_\_  
Represents  Self OR  Attorney for: \_\_\_\_\_  
State Bar Number (if applicable): \_\_\_\_\_

FOR CLERK'S USE ONLY

## SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

In the Matter of the Estate of:

Case Number PB: \_\_\_\_\_

### DECLARATION OF COMPLETION OF TRAINING for NON-LICENSED FIDUCIARIES

A  Deceased or  Protected Person

**Rule 27.1 of the Arizona Rules of Probate Procedure** requires that a person to be appointed guardian, conservator, or personal representative of an estate, who is neither a state-licensed fiduciary nor a corporation, complete a training program approved by the Supreme Court of this state before permanent **Letters of Appointment** are issued.

### UNDER PENALTY OF PERJURY

I state to the Court that in accord with Rule 27.1 of the Arizona Rules of Probate Procedure, I have completed the required training for non-licensed, non-corporate fiduciaries, as indicated below: (Check all that apply and provide applicable information.)

- |  |                       |
|--|-----------------------|
| <input type="checkbox"/> Unlicensed Fiduciary    | Date completed: _____ |
| <input type="checkbox"/> Conservatorship         | Date completed: _____ |
| <input type="checkbox"/> Personal Representative | Date completed: _____ |
| <input type="checkbox"/> Guardianship            | Date completed: _____ |

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

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

**INSTRUCTIONS:** Fill out this Declaration completely and provide accurate information. Make at least one copy. You will need to file the original with the Clerk of Court and provide a copy to the Probate Registrar before receiving any *permanent* letters of appointment.