

**This is a private record.**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

In the District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

<p>In the Matter of Protection for</p> <p>_____, Respondent</p>	<p><b>Visitor's Report on Request to Excuse Respondent from the Hearing under Section 75-5-303</b></p> <p>_____ Case Number</p> <p>_____ Judge</p>
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1. The court appointed me to investigate whether to excuse the Respondent from attending the hearing under Section 75-5-303. During my investigation I: (Choose all that apply.)
- interviewed the Respondent;
  - interviewed the proposed guardian;
  - interviewed the physician who has examined the Respondent;
  - interviewed \_\_\_\_\_;  
(name and relationship to Respondent)
  - visited the Respondent's residence;
  - conducted the following other inquiries: (describe)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. The Respondent lives at:

\_\_\_\_\_ Address

\_\_\_\_\_ City, State, Zip

3. The Respondent lives: (Choose one.)

Alone

Licensed facility \_\_\_\_\_ (name)

Other \_\_\_\_\_ (describe)

With

Name	Relationship to the Respondent
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Unable to determine

4. The Respondent's ability to travel to the hearing is

Good

Poor

Fair

Unable to determine

Why?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_





### Certificate of Service

I certify that I filed with the court and served a copy of this Visitor's Report on Request to Excuse Respondent from the Hearing on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
(Petitioner or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Protected Person or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Interested Person or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Signature ► \_\_\_\_\_

\_\_\_\_\_

Date

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