PUBLIC TRUSTEE AND GUARDIAN

APPLICATION FOR THE APPOINTMENT OF AN EMERGENCY GUARDIAN

Telephone: 6207 9800 • Facsimile: 6207 9811

The person making the application must discuss the matter with the Public Trustee and Guardian.

An emergency guardianship order is valid for up to 10 days.

If emergency guardianship orders are required for longer than 10 days, you must lodge an application with the Australia Capital Territory Civil & Administrative Tribunal (ACAT) for long term-orders. www.acat.act.gov.au

1. Emergency Guardianship

Please indicate what type of emergency guardianship order is being sought.

☐ Legal ☐ Health ☐ Accommodation

2. Details of the person subject to this application

Hospital:	Hospital Number:	Ward:

Full name	Date of birth

Current address

Telephone number

Home address

Telephone number

3. Details of service providers

Details of service providers, including medical practitioners who are currently involved with this person.

Name	Relationship	Phone number

4. Details of relatives or friends involved with this person

Details of any known relatives or friends currently involved with this person. It is necessary for you to contact the relatives or friends and discuss this application with them.

Name	Relationship	Phone number

Details of contact

5. Reasons for making Emergency Guardianship Application

What are your reasons for making this emergency guardianship application?
Please include a clear description of the emergency decision/s that is required:

6. Time and date

Please indication the time and date you informed the person subject to this application that you are applying got emergency orders:

Time

Date

7. Details of the person making application

Full name of person making application (please print)

Contact telephone number	Facsimile number

Relationship to person subject of this application

Signature of person making application	Date

Please print, sign and send to guardians@ptg.gov.au

For further advice/support:-

PUBLIC TRUSTEE AND GUARDIAN

PO Box 221
Civic Square ACT 2608

Telephone: (02) 6207 9800
Facsimile: (02) 6207 9811

Email: guardians@act.gov.au
Website: www.ptg.act.gov.au

PUBLIC TRUSTEE AND GUARDIAN

MEDICAL REPORT FOR THE APPOINTMENT OF AN EMERGENCY GUARDIAN

Telephone: 6207 9800 • Facsimile: 6207 9811

1. Details of person subject to this application

Hospital Number:

Full name

Date of birth

2. Guardianship decisions

Please state clearly the guardianship decisions that are required:

3. Impaired decision-making capacity

Please state clearly what impaired decision-making capacity the person has that prevents them making decisions in relation to their health and welfare:

4. Doctors contact details

Name of doctor preparing medial report: (please print)

Contact Telephone Number of Doctor preparing medical report

Signature of Doctor

Date