STATE OF SOUTH DAKOTA	)	IN CIRCUIT COURT
	)	
COUNTY OF _____	)	_____ JUDICIAL CIRCUIT
	)	

****

In the Matter of the Conservatorship of	)	____GDN_____
	)	
_____,	)	CONSERVATOR'S PETITION TO
	)	☐ MODIFY ☐ TERMINATE
a ☐ Minor ☐ Protected Person.	)	CONSERVATORSHIP

****

I/We, _____ , the Conservator(s) for the above-mentioned Individual, being duly sworn upon oath, state and affirm the following:

1. I was appointed conservator of the above-mentioned Individual on _____ (*month*), _____ (*day*), _____ (*year*).

2. I provide the following assistance, services, and protection to the Individual (*please detail*):

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

3. My contact with the Individual includes (*please describe frequency and types of contact—in person, over the phone, etc.—and also describe the Individual's ability to communicate*):

_____
_____
_____
_____
_____
_____
_____

4. As a result of these contacts, I request the Court (*select one*):

   a. ☐ TERMINATE the conservatorship, or ☐ MODIFY the conservatorship as follows:

   _____
   _____
   _____
   _____

b. This request to modify or terminate is based on (1) my observations that the need for the conservatorship has changed AND/OR (2) the fact that the current Conservator(s) are unable or unwilling to exercise the assigned duties and no other suitable conservator candidate is capable or willing (*please explain below*):

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

I/We swear or affirm under oath that the information I/we provided in this Petition and Affidavit is true and correct to the best of my/our knowledge. I/We affirm that this Petition and Affidavit is brought in the best interests of the above-named Individual. I/We request a hearing on this Petition pursuant to SDCL 29A-5-508. **If I/we seek to terminate, attached to this Petition is the Final Accounting and Objection Notice (if not waived by the Court per SDCL 29A-5-409).**

Dated _____ ___ , _____
(month) (day) (year)

_____
Conservator's Signature
(Sign only in front of Notary or Clerk)

_____
Mailing Address

_____
City, State, and Zip Code

_____
Phone Number

_____
E-mail Address

_____
Co-Conservators' Signature(s) (if any)

Sworn/affirmed before me this
_____ day of _____, 20____.

_____
(Notary Public / Clerk of Courts)

If Notary, my commission expires: _____
(SEAL)