

Questionnaire - Review of Appointment of Guardian or Manager

Under the *Guardianship and Management of Property Act 1991*

ACAT file number

GT

Under the *Guardianship and Management of Property Act 1991* the ACT Civil and Administrative Tribunal (ACAT) must review orders it has made appointing a guardian or manager at least once every three years. ACAT is reviewing the orders made in relation to the 'protected person'.

Who should complete this form? Each guardian and manager appointed in relation to the protected person. A separate form from each guardian and/or manager is required.

ACAT will consider the information provided in this form when it reviews the order.

Once you have completed this form, send or deliver it to ACAT using the information on the final page.

1. Protected person's details

Protected person's
full name

Date of birth

Protected person's
residential address

2. Guardian or manager's details

Full name

(of guardian or manager)

You are appointed as

Guardian

Manager

Guardian and Manager

Your postal address

Your contact number

Your email address

Do you consent to continuing your appointment?

Guardian: Yes No Not applicable

Manager: Yes No Not applicable

3. Details of appointment

Attach a page(s) if there is insufficient space.

a. What is the protected person's current condition or disability?

b. Has there been any change in the protected person's condition or disability since the current orders were made?

Yes No

If yes, provide details:

c. Do you think with support the protected person can make, participate in, and communicate their own decisions without a guardian and/or manager?

Yes No

If yes, provide details of the support that can be provided or facilitated:

d. Do you think that the current orders need to be varied or revoked?

Yes No

If yes, say why:

e. Do you think that a change of guardian or manager should be considered?

Yes No

If yes, say why:

f. Are there any issues or matters concerning the guardian, manager or the protected person that you think the Tribunal should know or consider?

Yes No

If yes, provide details:

4. New contact details

Complete this section if you (the guardian or manager) or the protected person have changed their contact details.

If more than one person has changed their contact details, attach a separate page.

Name	<input type="text"/>
Position	<input type="checkbox"/> Protected person <input type="checkbox"/> Guardian <input type="checkbox"/> Manager
Postal address	<input type="text"/>
Contact number	<input type="text"/>
Email address	<input type="text"/>

5. Signature

By signing this form, I certify that to the best of my knowledge:

- All information provided is true and correct and is not misleading; and
- No relevant information has been left out

Name of person signing (print)	<input type="text"/>
Signature	<input type="text"/>
Date	<input type="text"/>

Sent or deliver this form to ACAT in person or by:

Email tribunal@act.gov.au
Fax (02) 6205 4855
Post GPO Box 370 CANBERRA ACT 2601