

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF _____

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In the Matter of the Application
for the Appointment of a
Guardian of

Index No. _____

_____,

A Person Alleged To Be Incapacitated

CONSENT OF
COURT EVALUATOR

-----X

Pursuant to the Order of Honorable _____, a Justice of the Court, dated the ___ day of _____, ____, I, _____, do hereby consent to act as Court Evaluator for _____, the above Alleged Incapacitated Person, in this proceeding.

Dated: _____, New York

_____, _____

[Name of Court Evaluator]

STATE OF _____)

) SS.:

COUNTY OF _____)

On the ___ day of _____ in the year 20__ before me, the undersigned, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

(Signature and office of individual taking acknowledgment)