Government of **Western Australia**
Department of **Justice**

Enduring Power of Guardianship Information Kit

Office of the PublicAdvocate

Enduring Power of Guardianship Information Kit

This information kit has been prepared by the Office of the Public Advocate to give people a basic understanding of enduring powers of guardianship and to assist them in completing the form.

For more information about enduring powers of guardianship and the role of an enduring guardian, including a comprehensive guide to enduring powers of guardianship, visit the Office of the Public Advocate's website www.publicadvocate.wa.gov.au or call the office's telephone advisory service on 1300 858 455.

Additional copies of this kit can be downloaded for free from the Office of the Public Advocate's website. If you are unable to do this, contact the Office of the Public Advocate on 9278 7300 for options to get printed copies of the kit.

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Enduring power of guardianship form

1.0 What is an enduring power of guardianship?

An enduring power of guardianship is a legal document which enables you (the appointor) to appoint a person of your choice to make **personal**, **lifestyle** and **treatment decisions** on your behalf if you lose the ability to make these decisions for yourself because of an illness or injury. This person (the appointee) becomes your enduring guardian.

An enduring power of guardianship **cannot** be used to appoint someone to make property and financial decisions. If you want to appoint someone to manage your financial affairs you should make an enduring power of attorney. For more information about enduring powers of attorney, visit the Office of the Public Advocate's website www.publicadvocate.wa.gov.au.

You also have the option of completing an advance health directive. This tool enables you to make decisions about the health care you receive in the future.

For information about advance health directives, contact the Department of Health via telephone (08) 9222 2300, email acp@health.wa.gov.au or visit their website www.health.wa.gov.au/advancecareplanning.

2.0 Why appoint an enduring guardian?

By appointing an enduring guardian you will be giving a person you know and trust the authority to make personal, lifestyle and treatment decisions on your behalf, if you become unable to do so in the future due to a decision-making disability.

When choosing an enduring guardian, the Public Advocate recommends that you give careful consideration to the following questions:

- Is the person trustworthy and likely to always act in your best interests?
- Is the person willing to take on the responsibilities of the role and are they aware of your personal beliefs and lifestyle preferences?
- Will the person be easily available to make decisions as required?
- Could the choice of enduring guardian cause conflict within your family? If so, is there someone else more suitable for the role?

Consulting family members to ensure they are aware of your wishes is recommended as it may help avoid potential difficulties if/when your enduring power of guardianship comes into effect.

You can appoint a sole enduring guardian (one person) or joint enduring guardians (more than one person). It is important to note however, that joint enduring guardians **must** always make decisions together and agree on any decision they make.

You can also appoint a substitute enduring guardian to act in certain circumstances, for example if your enduring guardian is not available.

3.0 Who can appoint an enduring guardian?

If you are 18 years of age or older and have full legal capacity (that is, you can make a formal agreement, you understand that you are appointing someone to make your personal, lifestyle and treatment decisions and you understand the implications of statements contained in the document), you can appoint an enduring guardian by making an enduring power of guardianship.

If you are considering making an enduring power of guardianship but your capacity to do so might be questioned, you are advised to seek the opinion of at least one doctor qualified to assess your capacity. When seeking this opinion, you should advise the doctor of your intention to make an enduring power of guardianship and request a written report on the assessment which clearly states whether or not you have capacity.

If you require an assessment of your capacity and English is not your first language, it is recommended you have an accredited interpreter attend the assessment.

If you are assessed as having full legal capacity it is advisable that the doctor who made the assessment, be one of the two people who witness your enduring power of guardianship.

If you are assessed as not having capacity, you will be unable to make an enduring power of guardianship.

Making an enduring power of guardianship on behalf of another person is not possible under any circumstance. If a person has lost capacity and personal, lifestyle and treatment decisions are required and it is not possible for these decisions to be made in an informal way, it may be necessary to make an application to the State Administrative Tribunal for the appointment of a guardian.

3.1 What if I cannot read or write, sign my name and/or understand English?

Being unable to read or write, sign your name or understand English will not prevent you from making an enduring power of guardianship.

If you are unable to sign your name, because for example:

- you understand English but cannot write
- you understand English but cannot read or write
- you do not understand English and cannot write.

A mark of any kind, including an initial, cross or even a thumb print is sufficient. However, an explanatory clause known as a 'marksman clause' will need to be included in your enduring power of guardianship.

If you cannot understand English, the form must be read to you by an accredited interpreter to ensure you understand exactly what you are doing by completing an enduring power of guardianship. An explanatory clause known as a 'readover clause' must be inserted into your enduring power of guardianship stating that the form has been read to you by an accredited interpreter and that you understand the effect of making an enduring power of guardianship.

The Public Advocate recommends that you seek legal advice (from a solicitor or community legal centre) if a marksman or readover clause needs to be included in the enduring power of guardianship. Examples of marksman and readover clauses can be found at Appendix C.

4.0 Who can be appointed as an enduring guardian?

You can appoint anyone as your enduring guardian, provided they are 18 years of age or older and have full legal capacity.

Your enduring guardian does not need to live in Western Australia, although their availability and ability to make decisions on your behalf from another State or country should be considered.

5.0 When does an enduring power of guardianship come into operation?

An enduring power of guardianship would come into effect only if you (the appointor) are no longer able to make reasonable judgements about personal, lifestyle or treatment matters.

Any decisions made by your enduring guardian(s) have the same legal status as a decision made by you.

6.0 How is an enduring guardian appointed?

To appoint an enduring guardian you must complete an enduring power of guardianship form. To be legally enforceable, your enduring power of guardianship form must be in the form, or substantially in the form, specified in Schedule 1 of the *Guardianship and Administration Regulations 2005*.

The form at the back of this kit meets these requirements and the step-by-step instructions will help you complete the form.

The form must be completed and witnessed correctly, and the person or people whom you wish to appoint as your enduring guardian(s) must accept the appointment by completing the acceptance section of the form.

7.0 Who should be given a copy of the enduring power of guardianship?

It is recommended that all enduring guardians and substitute enduring guardians are given a certified copy of your enduring power guardianship. To ensure that people are aware you have made an enduring power of guardianship and that they consult your enduring guardian as required, it is also recommended that a certified copy is given to your general practitioner and relevant health professionals. You may also wish to provide a copy to family members. For details on how to certify copies of your enduring power of guardianship see Appendix A.

8.0 Can an enduring power of guardianship be cancelled?

While you have capacity:

You can cancel your enduring power of guardianship at anytime while you have legal capacity. It is recommended that you do so in writing. A letter explaining that you wish to cancel (revoke) your enduring power of guardianship, should be given to your enduring guardian(s), any substitute enduring guardian(s) and any other interested party to whom you had provided a copy of your enduring power of guardianship. Where possible, you should collect the copies of your enduring power of guardianship that you circulated and destroy them.

If your enduring guardian is no longer willing or able to act in the role, and you still have capacity, written renouncement should be provided to you by the enduring guardian and the same process followed, as described above.

Following the revocation of an enduring power of guardianship, if you make a new enduring power of guardianship it is recommended that you attach the old enduring power of guardianship and the written revocation to it, to make it clear which enduring power of guardianship is in force.

If you have lost capacity:

You cannot cancel your enduring power of guardianship if you have lost legal capacity. This is a safeguard against people taking advantage of someone after they have lost capacity.

If you have lost capacity and you or another relevant person believe that the enduring guardian is not acting in your best interests, an application must be made to the State Administrative Tribunal. The Tribunal will then decide if the enduring power of guardianship should be cancelled (revoked).

Similarly, an application must be made to the State Administrative Tribunal if you have lost capacity and your enduring guardian is no longer willing or able to act in the role.

9.0 How to complete the enduring power of guardianship form

These instructions refer to the form at the back of this kit.

In the spaces provided insert:

- the date (day, month and year) that you are filling out your enduring power of guardianship form
- your full name and residential address
- your date of birth (day, month and year).

1 Appointment of enduring guardian(s)

If you want to **appoint one person** as your sole enduring guardian, write their name and address in the space provided under clause 1A. To make your choice clear, you could then cross out and initial clause 1B.

OR

If you want to **appoint two or more people** as joint enduring guardians, write their names and addresses in the spaces provided under clause 1B. To make your choice clear, you could then cross out and initial clause 1A.

If you want to appoint more than two people as joint enduring guardians, write their names and addresses on another piece of paper and attach it to this form. This page will need to be signed by yourself and the witnesses.

2 Appointment of substitute enduring guardian(s)

If you want to **appoint one or more substitute** enduring guardian(s) complete clause 2. In the space provided, write the circumstances in which you want your substitute enduring guardian(s) to act.

For example:

- If either of my joint enduring guardians are unable to continue in the role for any reason, then the substitute enduring guardian named here is to take the place of either enduring guardian.
- If my sole enduring guardian is overseas for periods of three months or more at any time, my substitute enduring guardian is to act in his/her place.

If you only want to appoint one substitute enduring guardian cross out and initial the space for the second substitute guardian.

OR

If you **do not want to appoint a substitute** enduring guardian, to make your choice clear, you could cross out and initial clause 2.

3 Death of a joint enduring guardian

If you are **not appointing joint enduring guardians**, you could cross out and initial clauses 3A and 3B to make your choice clear.

If you are **appointing joint enduring guardians**:

If you want your surviving joint enduring guardian(s) to continue acting if one or more joint enduring guardian(s) die, cross out and initial clause 3B, to make your choice clear.

OR

If you do not want your surviving joint enduring guardian(s) to continue acting if one or more joint enduring guardian(s) die, cross out and initial clause 3A, to make your choice clear.

4 Functions of the enduring guardian(s)

The functions of an enduring guardian are limited to personal, lifestyle and treatment decisions. You can give your enduring guardian(s) the authority to make all of these decisions OR you can limit their authority to specific functions.

If you want your enduring guardian(s) to be able to perform **all of the functions** of an enduring guardian, you could cross out and initial clause 4B to make your choice clear.

OR

If you want to **limit the functions** that your enduring guardian(s) may perform, cross out and initial clause 4A and cross out and initial any of the functions listed under clause 4B which you do not want your enduring guardian(s) to perform.

For example:

- If you do not want your enduring guardian(s) to have a role in deciding accommodation issues on your behalf, paragraphs (a) and (b) should be crossed out and initialled.
- If you do not want your enduring guardian(s) to have the authority to consent or refuse treatment on your behalf, paragraph (d) should be crossed out and initialled.

If you would like your enduring guardian(s) to perform one or more functions that are not listed on the form, write these additional functions on another piece of paper and attach it to this form. This page will need to be signed by yourself and the witnesses.

You may not authorise your enduring guardian(s) to make financial or property decisions. An enduring power of attorney form must be completed to appoint someone to perform this function.

5 Circumstances in which enduring guardian(s) may act

If you want your enduring guardian(s) to be able to act in **all circumstances**, you could cross out and initial clause 5, to make your choice clear.

OR

If there are **certain circumstances** in which you want your enduring guardian(s) to act, write these circumstances in the space provided in clause 5.

For example:

- My enduring guardian is only to act while they live in the same town as me.
- I have a diagnosed mental illness and my enduring guardian is to act only at times when my doctor states I am unwell and do not have capacity.

6 Directions about how enduring guardian(s) are to perform functions

If you **do not have any specific directions**, you could cross out and initial clause 6, to make your choice clear.

OR

If you **have directions** for your enduring guardian, write these in full in clause 6.

For example:

- If I need to move into residential care, I want to live in a facility located near my current home.
- I would prefer to continue seeing my current general practitioner, Dr X, for my general medical needs as she has been my doctor for many years.
- If possible, all of my children are to be consulted before any major decisions are made on my behalf.

Signing the form

You, the appointor must sign with your normal signature in front of two witnesses in the space provided on page 3. The signing and witnessing of your enduring power of guardianship form completes the making of the power. You should therefore complete the form, sign it and have it witnessed on the same day.

It is also recommended that you sign or initial in the space provided on pages 1 and 2 to safeguard against pages of your enduring power of guardianship being substituted.

The role of the two witnesses is to confirm that the person signing the form is the person making the enduring power of guardianship.

The Public Advocate recommends that legal advice is sought to ensure the enduring power of guardianship is completed correctly if you use a marksman or readover clause.

Optional statement about advance health directive

If you have made an advance health directive, it is recommended that you indicate this in the space provided on the enduring power of guardianship form. This will alert health professionals and service providers to its existence.

Your enduring power of guardianship will still be valid if you choose not to complete this box.

If you have not made an advance health directive at the time of making your enduring power of guardianship, but do so at a later date, you can mark the box at that time.

Acceptance by appointee(s)

Appointee(s) do not need to be present when the appointor signs the form, but the enduring power of guardianship will not become valid until the acceptance of appointment as enduring guardian has been signed by all appointees and their signatures have been witnessed as required.

Substitute enduring guardians must also sign the acceptance of appointment as substitute enduring guardian which must also be witnessed as required.

Each appointee must sign that he/she accepts the appointment in the presence of two witnesses. The role of the witnesses is to confirm that the person accepting the appointment, is the person (the appointee) nominated as enduring guardian. Different witnesses can witness each appointee's signature.

Witnessing requirements

Signatures of both the appointor and appointee(s) must be witnessed by two people.

The witnesses must be at least 18 years of age and one of the two witnesses must be a person authorised to witness statutory declarations under the *Oaths, Affidavits and Statutory Declarations Act 2005* (see Appendix B).

The appointor, any person who has signed on behalf of the appointor, or any person named as an enduring guardian or substitute enduring guardian cannot be a witness.

There is no requirement for the witnesses to confirm that the appointor has full legal capacity. If there is any doubt about capacity, a witness may suggest professional medical advice be sought prior to the document being signed.

When providing name and address details of the witness, it is preferred that a street address, rather than a post office box is given. This address can be the business, place of employment or residential address.

Witnesses must:

- sign the enduring power of guardianship form with their usual signature
- include their full name and address
- state their qualifications to be a witness (for example, a teacher or a person over 18 years of age)
- write the date on which they are witnessing the signature.

Have I got it right? My final checklist for completing an enduring power of guardianship

To ensure you have completed your enduring power of guardianship correctly you must:

- ☐ be at least 18 years of age and have full legal capacity
- ☐ have nominated only people as enduring guardian(s) and substitute enduring guardian(s) who are at least 18 years of age and have full legal capacity
- ☐ have used the form at the back of this kit or a form which meets the legislative requirements
- ☐ have provided the full names and current residential addresses of your enduring guardian(s) and substitute enduring guardian(s)
- ☐ have completed all sections of the form as required and crossed out and initialled clauses that do not apply to your situation
- ☐ have indicated the functions you wish your enduring guardian(s) to perform by carefully completing clause 4
- ☐ have set out the circumstances in which your enduring guardian(s) may act OR crossed out and initialled clause 5 if you do not want to specify particular circumstances
- ☐ have given directions about how your enduring guardian(s) are to perform their role OR crossed out and initialled clause 6 if you do not want to make any directions

- ☐ have signed the form, including any pages you have added to your enduring power of guardianship with your usual signature or have followed the terms of a marksman or readover clause (see Appendix C)
- ☐ have considered signing and having witnessed, the first two pages of the enduring power of guardianship in the space provided (optional)
- ☐ have had two eligible witnesses (see Appendix B) present when you signed the enduring power of guardianship or when it was signed using a marksman or readover clause
- ☐ have had two eligible witnesses sign and date the form, including any additional pages you have added to your enduring power of guardianship
- ☐ have had one witness state their qualifications as an authorised witness
- ☐ have had all enduring and substitute enduring guardian(s) accept the appointment by completing the acceptance section of the form
- ☐ have had each acceptance witnessed by two eligible witnesses who were both present when the enduring guardian(s) signed the acceptance of appointment
- ☐ have considered completing the optional statement to advise if you have also made an advance health directive.

Appendix A

Certifying copies of documents

What is a certified copy?

A certified copy is a photocopy of a document which has been certified as a direct copy of the original document.

Who can certify a copy?

There is no legislation in Western Australia that stipulates either how to certify a copy of a document or who can do it. However, it is usual for documents to be certified by a person who is authorised as a witness for statutory declarations under the *Oaths, Affidavits and Statutory Declarations Act 2005* (see Appendix B).

How do I certify a copy?

Before certifying a document, you must ensure that the copy to be certified is an identical copy of the original. A suggested wording for the certification is as follows:

I certify that this appears to be a true copy of the document produced to me on <date>.

Signature

_____

Name

_____

Qualification (e.g. Justice of the Peace, Doctor)

_____

The person certifying the document is stating their opinion that the document is a true copy, not that the original document is authentic. Certifying a copy does not in any way 'authenticate' either the copy or the original document.

Documents in languages other than English

You should not certify a document in a language other than English unless you can be sure that the original and the copy are identical. A solution to this is to have the original photocopied in your presence.

Multiple-page documents

If the original is a multiple-page document, each page must be checked against the copy to ensure that it is correct. You can then proceed as follows:

- sign or initial each page
- number each page of the copy as 'page 1 of 40', 'page 2 of 40' and so on
- certify the last page as follows:

I certify that this <number of pages> page document, each page of which I have numbered and signed/ initialled, appears to be a true copy of the document produced to me on <date>.

Signature _____

Name _____

Qualification (e.g. Justice of the Peace, Doctor)

_____

Appendix B

People authorised to witness enduring powers of guardianship

Please note one of your witnesses must be from this list.

Schedule 2 of the *Oaths, Affidavits and Statutory Declarations Act 2005* lists the people who are authorised to witness declarations in Western Australia. These are:

- Academics (post-secondary institution)
- Accountants
- Architects
- Australian Consular Officers
- Australian Diplomatic Officers
- Bailiffs
- Bank managers
- Chartered secretaries, governance advisers or risk managers
- Chemists
- Chiropractors
- Company auditors or liquidators
- Court officers
- Defence force officers
- Dentists
- Doctors
- Electorate officers of a member of State Parliament
- Engineers
- Industrial organisation secretaries
- Insurance brokers
- Justices of the Peace
- Landgate officers
- Lawyers
- Local Government CEOs or deputy CEOs
- Local government councillors
- Loss adjusters
- Marriage celebrants
- Members of Parliament
- Ministers of religion
- Nurses
- Optometrists
- Patent attorneys
- Physiotherapists
- Podiatrists
- Police officers
- Post office managers
- Psychologists
- Public notaries
- State and commonwealth public servants
- Real estate agents
- Settlement agents
- Sheriffs or deputy sheriffs
- Surveyors
- Teachers
- Tribunal officers
- Veterinary surgeons

and anyone authorised under the *Commonwealth Statutory Declarations Act 1959* to take a statutory declaration.

NOTE: No person under the age of 18 years is qualified to witness any Statutory Declarations or instruments.

Different criteria apply for execution of an enduring power of guardianship by witnesses in places other than Western Australia. If the enduring power of guardianship is signed elsewhere you should seek legal advice.

If you need more information about a person's eligibility to be a witness, see the Office of the Public Advocate's website www.publicadvocate.wa.gov.au or call the Telephone Advisory Service 1300 858 455.

Appendix C

Marksman and readover clauses

Samples of these clauses are included below for guidance. All witnesses should meet the requirements of any particular clause. Where necessary, an interpreter should sign the document as witness if qualified to do so or if not so qualified, sign in addition to the two qualified witnesses.

1. A person who understands English but cannot write

Signed by *(name of marksman)* _____
by making (his or her) mark, (he or she) being incapable of signing (his or her) name.
Mark _____
In the presence of *(witness's signature)* _____
(witness's full name) _____
(witness's address) _____
(occupation of witness) _____
on *(date)* _____

2. A person who understands English but cannot read or write

Signed by *(name of marksman)* _____
by making (his or her) mark, (he or she) being unable to read or write, after this instrument had been read and explained to (him or her) and (he or she) then appearing to understand fully its nature and effect.
Mark _____
In the presence of *(witness's signature)* _____
(witness's full name) _____
(witness's address) _____
(occupation of witness) _____
on *(date)* _____

3. A person who does not understand English and cannot write

Signed by *(name of marksman)* _____
by making (his or her) mark, (he or she) being unable to read in the English language after this instrument had been read and explained to (him or her) in (name of second language) _____ by (name of interpreter) _____ a person understanding both languages, (he or she) then appearing to understand fully its nature and effect.

Mark _____

In the presence of *(interpreter's signature)* _____

(interpreter's full name) _____

(interpreter's address) _____

_____ on *(date)* _____

4. Execution by a person who does not understand English but who can write

Signed by *(name of person)* _____
(he or she) being unable to read in the English language after this instrument had been read and explained to (him or her)

in (name of second language) _____

by (name of interpreter) _____

a person understanding both languages, (he or she) then appearing to understand fully its nature and effect.

Mark _____

In the presence of *(interpreter's signature)* _____

(interpreter's full name) _____

(interpreter's address) _____

_____ on *(date)* _____

Appendix D

Contact details of relevant agencies

Office of the Public Advocate

Address: PO Box 6293, East Perth WA 6892
Phone: (08) 9278 7300
Telephone Advisory Service: 1300 858 455
Fax: (08) 9278 7333
Email: opa@justice.wa.gov.au
Website: www.publicadvocate.wa.gov.au

The Public Advocate provides advice and information on guardianship and administration, enduring powers of attorney and enduring powers of guardianship. Further copies of this publication and a range of other publications are available for download from the office's website.

State Administrative Tribunal (the Tribunal)

Phone: (08) 9219 3111 or 1300 306 017
Email: sat@justice.wa.gov.au
Website: www.sat.justice.wa.gov.au

The State Administrative Tribunal can be contacted for information and advice on applications for guardianship, administration, enduring powers of attorney, enduring powers of guardianship and advance health directives. Information about how to apply to the Tribunal is also available on the Tribunal's website.

Enduring Power of Guardianship

Print form

This Enduring Power of Guardianship is made under the *Guardianship and Administration Act 1990* Part 9A

on the _____ day of _____ 20 _____

by *(appointor's full name)* _____

of (appointor's residential address) _____

_____ *born on (appointor's date of birth)* _____

This Enduring Power of Guardianship has effect, subject to its terms, at any time I am unable to make reasonable judgments in respect of matters relating to my person.

1 Appointment of enduring guardian(s)

1A Sole enduring guardian

I appoint *(appointee's full name)* _____

of *(appointee's residential address)* _____

_____ to be my enduring guardian.

OR

1B Joint enduring guardians

I appoint *(appointee's full name)* _____

of *(appointee's residential address)* _____

_____

and *(appointee's full name)* _____

of *(appointee's residential address)* _____

_____ to be my joint enduring guardians.

2 Appointment of substitute enduring guardian(s)

I appoint *(appointee's full name)* _____

of *(appointee's residential address)* _____

_____ to be my substitute enduring guardian in substitution of

(enduring guardian's name) _____

I appoint *(appointee's full name)* _____

of *(appointee's residential address)* _____

_____ to be my substitute enduring guardian in substitution of

(enduring guardian's name) _____

My substitute enduring guardian(s) is (are) to be my enduring guardian(s) in the following circumstances:

_____

_____

_____

Signing each page is not compulsory but may provide a safeguard against pages being substituted. Signature of

(appointor) _____ (witness 1) _____ (witness 2) _____

3 Death of joint enduring guardian

3A Surviving joint enduring guardians to act

If one or more of my joint enduring guardians die, I want the surviving enduring guardian(s) to act.

OR

3B Surviving joint enduring guardians not to act

If one or more of my joint enduring guardians die, I do not want the surviving enduring guardian(s) to act.

4 Functions of enduring guardian(s)

Note: An enduring guardian cannot be authorised to make decisions about financial or property matters.

4A All functions authorised

I authorise my enduring guardian(s) to perform in relation to me all of the functions of an enduring guardian, including making all decisions about my health care and lifestyle.

OR

4B Only specified functions authorised

I authorise my enduring guardian(s) to perform in relation to me only the following functions:

a decide where I am to live, whether permanently or temporarily

b decide with whom I am to live

c decide whether I should work and, if so, any matters related to my working

d consent, or refuse consent, on my behalf to any medical, surgical or dental treatment or other health care (including palliative care and life sustaining measures such as assisted ventilation and cardiopulmonary resuscitation)

e decide what education and training I am to receive

f decide with whom I am to associate

g commence, defend, conduct or settle on my behalf any legal proceedings except proceedings relating to my property or estate

h advocate for, and make decisions about, which support services I should have access to

i seek and receive information on my behalf from any person, body or organisation

j _____

k _____

Signing each page is not compulsory but may provide a safeguard against pages being substituted. Signature of (appointor) _____ (witness 1) _____ (witness 2) _____

5 Circumstances in which enduring guardian(s) may act

My enduring guardian(s) may act only in the following circumstances:

_____

_____

_____

_____

_____

6 Directions about how enduring guardian(s) to perform functions

My enduring guardian(s) is (are) to perform his/her (their) functions in accordance with the following directions:

_____

_____

_____

_____

_____

Signed by:

(appointor's signature) _____

Witnessed by a person authorised to witness statutory declarations:

(authorised witness's signature) _____

(authorised witness's full name) _____

(authorised witness's address) _____

_____

(occupation of authorised witness) _____ on *(date)* _____

And by another person:

(other witness's signature) _____

(other witness's full name) _____

(other witness's address) _____

_____ on *(date)* _____

I have made an Advance Health Directive ☐ If yes, tick or cross the box

Acceptance of appointment as enduring guardian

I, *(name of appointee)* _____

accept the appointment as an enduring guardian

(appointee's signature) _____ on *(date)* _____

Witnessed by a person authorised to witness statutory declarations:

(authorised witness's signature) _____

(authorised witness's full name) _____

(authorised witness's address) _____

_____

(occupation of authorised witness) _____ on *(date)* _____

And by another person:

(other witness's signature) _____

(other witness's full name) _____

(other witness's address) _____

_____ on *(date)* _____

Acceptance of appointment as enduring guardian

I, *(name of appointee)* _____

accept the appointment as an enduring guardian

(appointee's signature) _____ on *(date)* _____

Witnessed by a person authorised to witness statutory declarations:

(authorised witness's signature) _____

(authorised witness's full name) _____

(authorised witness's address) _____

_____

(occupation of authorised witness) _____ on *(date)* _____

And by another person:

(other witness's signature) _____

(other witness's full name) _____

(other witness's address) _____

_____ on *(date)* _____

Acceptance of appointment as substitute enduring guardian

I, *(name of appointee)* _____

accept the appointment as substitute enduring guardian

(appointee's signature) _____ on *(date)* _____

Witnessed by a person authorised to witness statutory declarations:

(authorised witness's signature) _____

(authorised witness's full name) _____

(authorised witness's address) _____

_____

(occupation of authorised witness) _____ on *(date)* _____

And by another person:

(other witness's signature) _____

(other witness's full name) _____

(other witness's address) _____

_____ on *(date)* _____

Acceptance of appointment as substitute enduring guardian

I, *(name of appointee)* _____

accept the appointment as substitute enduring guardian

(appointee's signature) _____ on *(date)* _____

Witnessed by a person authorised to witness statutory declarations:

(authorised witness's signature) _____

(authorised witness's full name) _____

(authorised witness's address) _____

_____

(occupation of authorised witness) _____ on *(date)* _____

And by another person:

(other witness's signature) _____

(other witness's full name) _____

(other witness's address) _____

_____ on *(date)* _____

Government of **Western Australia**
Department of **Justice**

Office of the
PublicAdvocate