



**5. Mental Health**

- a. The adult's current mental condition is \_\_\_excellent. X good. \_\_\_fair. \_\_\_poor.
- b. During the past year, the adult's mental condition has  
X remained about the same.  
\_\_\_improved. explain \_\_\_\_\_  
\_\_\_worsened. explain \_\_\_\_\_
- c. During the past year, treatment or evaluation by a psychiatrist, psychologist, or social worker X was \_\_\_was not provided.

**6. Social Activities/Services**

- a. The adult's current social condition is \_\_\_excellent. X good. \_\_\_fair. \_\_\_poor.
- b. During the past year, the adult's social condition has  
X remained about the same.  
\_\_\_improved. explain \_\_\_\_\_  
\_\_\_worsened. explain \_\_\_\_\_
- c. During the past year, the adult has participated in the following activities:  
\_\_\_recreational \_\_\_\_\_  
\_\_\_educational \_\_\_\_\_  
\_\_\_social \_\_\_\_\_  
\_\_\_occupational \_\_\_\_\_  
X no activities available.  
\_\_\_the adult refused to participate in any activities.  
\_\_\_the adult was unable to participate in any activities.

**7. List of Visits**

- a. During the past year, I visited the adult as follows: once every three months  
\_\_\_\_\_
- b. The average amount of time I spent on each visit was 1 hour
- c. The last time I visited with the adult was on 5/16/2005

**8. Activities**

During the past year, I performed the following activities on behalf of the adult:

\_\_\_\_\_  
\_\_\_\_\_

**9. Consultation**

During the past year, I consulted with the adult before making the following decisions:

\_\_\_\_\_  
\_\_\_\_\_

10. I believe the adult has the following unmet needs:

\_\_\_\_\_  
\_\_\_\_\_

11. The guardianship X should \_\_\_should not be continued because:

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12. As guardian, I have been ordered by the court to file an annual account which is attached.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Guardian

Oregon, MO 64473  
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