

**COMMONWEALTH OF MASSACHUSETTS
TRIAL COURT
PROBATE AND FAMILY COURT DEPARTMENT**

HAMPDEN Division

Docket No. HD _____

_____,
(Plaintiff / Petitioner)
vs. **In re:**

(Defendant / Respondent)

**MOTION TO
WITHDRAW**

Now comes _____, guardian ad litem, in this action who, pursuant to the published standards for guardian ad litem evaluators, requests to withdraw as evaluator in the above-captioned matter because:

the mental health professional serving as guardian ad litem is unable to perform his / her / their evaluative responsibilities because of a conflict with applicable professional standards, as explained below.

Date: _____

NOTICE OF HEARING

This motion will be heard at the Probate and Family Court in _____ (city) on _____ (mm/dd/year) at _____ (time of hearing).

(Signature of Motitioner)

(Print Name)

(Street Address)

(City/Town) (State) (Zip Code)

(Phone Number)

(Email Address)

The within motion is hereby **ALLOWED** **DENIED**

Date: _____

JUSTICE OF PROBATE AND FAMILY COURT

**COMMONWEALTH OF MASSACHUSETTS
TRIAL COURT
PROBATE AND FAMILY COURT DEPARTMENT**

HAMPDEN Division

Docket No. HD _____

_____,
(Plaintiff / Petitioner)
vs. **In re:**

(Defendant / Respondent)

**MOTION TO
WITHDRAW**

Date: _____

CERTIFICATE OF SERVICE

I hereby certify that I have served a true copy of this motion to: _____ (party / attorney of record), of _____ (address) by:

- mailing a copy by first class mail on _____ (date mailed).
- delivery in hand on _____ (date of delivery) at ____ (time) a.m. p.m.

Date: _____ _____ Signature

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