

The forms are in bilingual format for your convenience, but must be completed and filed with the court in English.
为了提供便利，表格用双语格式提供；但是，向法院提交的表格必须用英语填写。



CIRCUIT **ORPHANS' COURT FOR** _____, **MARYLAND**
巡回法院 孤儿法庭 City/County 城市/县 马里兰州

Located at _____ Case No. _____
地址 法院地址 案件编号

In the Matter of
关于

Name of Minor or Alleged Disabled Person Docket Reference
未成年人或声称残疾人姓名 诉讼事件表参考

NOTICE TO INTERESTED PERSONS
(Md. Rule 10-203 (d))
利害关系人通知
(马里兰州规则 10-203 (d))

A petition has been filed seeking appointment of a guardian of the person of _____, who is alleged to be a minor or disabled person.
为_____寻求监护人的申请已提交，
_____声称是未成年人或残疾人。

You are an “interested person,” that is, someone who should receive notice of this proceeding because you are related to or otherwise concerned with the welfare of this person.

您为“利害关系人”，即应该收到这个诉讼程序的人士，因为您与此人之福利有关或以其它方式涉及此人之福利。

If the court appoints a guardian for the person, that person will lose certain valuable rights to make individual decisions.

如果法院为此人指定了监护人，则此人将失去某些做出个人决定的宝贵权利。

Please examine the attached papers carefully. If you object to the appointment of a guardian, please file a response in accordance with the attached show cause order. (Be sure to include the case number). If you wish otherwise to participate in this proceeding, notify the court and be prepared to attend any hearing.

请仔细查看所附文件。如果您反对指定监护人，请依据所附的陈述理由命令提交回应。（请确保在回应中包括案件编号）。如果您反而希望参与这个诉讼程序，请告知法庭并做好准备出席任何听证。

Each certificate filed pursuant to Rule 10-202 that is attached to the petition will be admissible as a substantive evidence without the presence or testimony of the certifying health care professional unless you file a request that the health care professional appear to testify. The request must be filed at least ten (10) days before the trial date, unless the trial date is less than ten (10) days from the date your response is due. If the trial date is less than ten (10) days from the date your response is due, the request may be filed at any time before trial.

根据规则 10-202 附在申请一起提交的各项证书会纳为实质性证据，除非您提交医疗专业人员出庭作证的申请，否则给出证明的医疗专业人员无须在场或提供证词。申请必须在审判日期前至少十（10）天提交，除非审判日期距您的回应到期日不足十（10）天。如果审判日期距您的回应到期日不到十（10）天，申请可在审判前任何时间提交。

If you believe you need further legal advice about this matter, you should consult your attorney.

如果您认为需要更多关于这一事项的法律意见，您应该咨询您的律师。