

**IN THE CIRCUIT COURT OF \_\_\_\_\_ COUNTY, WEST VIRGINIA**

*For Clerk's Use Only*

IN RE: \_\_\_\_\_ CASE NUMBER \_\_\_\_\_ - G - \_\_\_\_\_  
AN ALLEGED PROTECTED PERSON

**AFFIDAVIT OF PHYSICIAN**  
[*West Virginia Code: § 44A-2-9(c)*]

STATE OF \_\_\_\_\_,  
COUNTY OF \_\_\_\_\_, to-wit:

This day, personally appeared before me the undersigned physician who, having been first duly sworn, says, represents and certifies as follows:

I, \_\_\_\_\_, a licensed physician in the State of \_\_\_\_\_, hereby certify that I have examined and/or evaluated the condition of ***[insert name of alleged protected person here]*** \_\_\_\_\_, and that in my expert opinion, this individual cannot attend the hearing addressing whether a guardian or conservator should be appointed for this individual for the following reasons [***check applicable reasons and provide supporting facts in spaces provided and attach additional pages, if necessary***]:

\_\_\_\_\_ The presence of the individual is not possible due to a physical inability. The basis for this opinion is as follows: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Requiring the presence of the individual would significantly impair the individual's health.  
Explain : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Other Reason(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_ [month], \_\_\_\_\_ [year].

\_\_\_\_\_  
**SIGNATURE OF PHYSICIAN**

The foregoing affidavit was taken, subscribed and sworn to before me by the said \_\_\_\_\_, in my said County and State on this, the \_\_\_\_\_ day of \_\_\_\_\_ [month], \_\_\_\_\_ [year].

Given under my hand and **NOTARIAL SEAL**  
**[AFFIX NOTARIAL SEAL]**

\_\_\_\_\_  
**NOTARY PUBLIC**

My Commission Expires: \_\_\_\_\_