

**IN THE COURT OF COMMON PLEAS  
PROBATE DIVISION  
HIGHLAND COUNTY, OHIO**

**IN THE MATTER OF THE GUARDIANSHIP OF \_\_\_\_\_**

**CASE NO.:** \_\_\_\_\_

**ATTENTION APPLICANTS**

**DIVORCE OR JUVENILE COURT PROCEEDINGS:** When there has been a DIVORCE or a Court proceeding in JUVENILE COURT involving a minor for whom a guardian is requested, this Court will presume it does not have jurisdiction to issue the guardianship order. Therefore, you, as the applicant, must prove by clear and convincing evidence that the Court does have jurisdiction to issue a guardianship order. If you are unable to prove that this Court has jurisdiction, you will lose your filing fee because the Court is unable, by law, to refund filing fees. In addition, the Court will notify the board of Education that the guardianship application has been dismissed. It is suggested that you consult with an attorney.

**SIX MONTH RESIDENCY REQUIREMENT FOR MINOR (R.C. 3127.15):** A minor must be a resident of this state for at least six (6) months before a guardianship can be established for the minor. If the minor has not resided in Ohio for six months, a release must be received from the court that decides guardianship in the state or country wherein the minor has resided for the last six consecutive months. The release must be a certified copy and must give permission to this Court to hear the guardianship application. If you file a guardianship application but fail to obtain a release from the other state or country by the time of the hearing, your guardianship application will be dismissed and you will lose your filing fee, as the Court is unable by law to refund filing fees.

I have read and understood the above information.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

PROBATE COURT OF \_\_\_\_\_ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF \_\_\_\_\_

CASE NO. \_\_\_\_\_

**APPLICATION FOR APPOINTMENT OF GUARDIAN  
OF MINOR**  
[R.C. 2111.03(C)]

Applicant, a resident of \_\_\_\_\_ County, Ohio, hereby applies for the appointment of (himself) (herself) or some suitable person as guardian of the following minor and represents that the applicant is not an administrator, executor, or other fiduciary of an estate wherein the minor is interested

| Name of Minor | Age | Date of Birth | Residence or Legal Settlement |
|---------------|-----|---------------|-------------------------------|
|               |     |               |                               |

Attached is a list of the next of kin of the minor. (Form 15.0)  
A guardian is necessary because (R.C. 2111.06), \_\_\_\_\_

**TYPE OF GUARDIANSHIP APPLIED FOR IS**

\_\_\_ non-limited \_\_\_ limited \_\_\_ person and estate \_\_\_ estate only \_\_\_ person only

**IF THE APPLICATION IS FOR LIMITED GUARDIANSHIP,**

The length (time period) of the guardianship requested is:  
\_\_\_ indefinite \_\_\_ definite to \_\_\_\_\_, 20\_\_\_

The limited powers requested are: \_\_\_\_\_

Applicant attaches affidavit pursuant to R.C. 3109.27.

Applicant represents that grounds exist for the Court to exercise its jurisdiction. (Applies to guardianship of person only. R.C. 3109.22).

The Applicant has (not) been charged with or convicted of a crime involving theft, physical violence, or sexual, alcohol or substance abuse except as follows (if applicable, state date and place of each charge or each conviction.)

The whole estate of said minor is estimated as follows:

|                           |          |
|---------------------------|----------|
| Personal Property .....   | \$ _____ |
| Real Estate .....         | \$ _____ |
| Annual Rents.....         | \$ _____ |
| Other annual income ..... | \$ _____ |
| Total                     | \$ _____ |

Applicant offers the attached bond in the amount of \$ \_\_\_\_\_

I hereby certify that all the information and statements contained in this application and attached exhibits are correct to the best of my knowledge and belief.

\_\_\_\_\_  
Attorney for Applicant

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City                      State                      Zip

\_\_\_\_\_  
City                      State                      Zip

\_\_\_\_\_  
Phone Number (include area code)

\_\_\_\_\_  
Phone Number (include area code)

\_\_\_\_\_  
Supreme Court Registration Number

PROBATE COURT OF \_\_\_\_\_ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF \_\_\_\_\_

CASE NO. \_\_\_\_\_

**NEXT OF KIN OF PROPOSED WARD**

[R.C. 2111.04]

(NOTE: Specify age and birthdate of each minor under 16 on the line containing the minor's name. List the name and address of the minor's parent, guardian or custodian on the name and address lines following the minor's address.)

| Service Waived |               | Relationship | Birthdate Of Minor |
|----------------|---------------|--------------|--------------------|
| 1. [ ]         | Name _____    | _____        | _____              |
|                | Address _____ |              | Zip _____          |
| 2. [ ]         | Name _____    | _____        | _____              |
|                | Address _____ |              | Zip _____          |
| 3. [ ]         | Name _____    | _____        | _____              |
|                | Address _____ |              | Zip _____          |
| 4. [ ]         | Name _____    | _____        | _____              |
|                | Address _____ |              | Zip _____          |
| 5. [ ]         | Name _____    | _____        | _____              |
|                | Address _____ |              | Zip _____          |
| 6. [ ]         | Name _____    | _____        | _____              |
|                | Address _____ |              | Zip _____          |
| 7. [ ]         | Name _____    | _____        | _____              |
|                | Address _____ |              | Zip _____          |
| 8. [ ]         | Name _____    | _____        | _____              |
|                | Address _____ |              | Zip _____          |
| 9. [ ]         | Name _____    | _____        | _____              |
|                | Address _____ |              | Zip _____          |
| 10. [ ]        | Name _____    | _____        | _____              |
|                | Address _____ |              | Zip _____          |

\_\_\_\_\_ Date

\_\_\_\_\_ Applicant

PROBATE COURT OF \_\_\_\_\_ COUNTY, OHIO  
IN THE MATTER OF THE GUARDIANSHIP OF \_\_\_\_\_  
CASE NO. \_\_\_\_\_

**WAIVER OF NOTICE AND CONSENT**

We, the undersigned, do each of us hereby waive the issuing and service of notice, and voluntarily enter our appearance herein.

We do hereby consent to the appointment of \_\_\_\_\_.

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

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

PROBATE COURT OF \_\_\_\_\_ COUNTY, OHIO  
\_\_\_\_\_, Judge

GUARDIANSHIP OF \_\_\_\_\_

CASE NO. \_\_\_\_\_

**AFFIDAVIT**  
**[R.C. 3109.27]**

State of Ohio, County of \_\_\_\_\_ S.S.

(To be filed only when guardianship of the person of a minor is sought)

Affiant being first duly sworn, deposes and says:

1. That the child's present address, the places where the child has lived within the last five years, and the names and present addresses of the person(s) with whom the child has lived during that period are:

2. That affiant has (not) participated as a party, witness, or in any other capacity in any litigation concerning the custody of the child(ren) in this or any other state.

3. That affiant has (no) information of any custody proceeding concerning the child(ren) pending in a court of this or any other state.

4. That affiant has (no) knowledge of any person not a party to the proceedings who has physical custody of the child(ren) or claims to have custody or visitation rights with respect to the child(ren).

If 2, 3, or 4 is answered in the affirmative, and the space afforded is insufficient for full explanation, please attach and incorporate herein any necessary information.

Affiant realizes that affiant has a continuing duty to inform the Court of any custody proceedings concerning the child(ren) in this or any other state of which affiant obtains information during the pendency of this proceeding.

\_\_\_\_\_  
Sworn to before me and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

STATE OF OHIO )  
 )  
 COUNTY OF \_\_\_\_\_ ) **SS:**

**AFFIDAVIT OF GUARDIAN APPLICANT**

I, \_\_\_\_\_ affirm the following:  
 (Name)

I have no pending misdemeanor or felony cases and have not been convicted of or pleaded guilty to any misdemeanor or felony offense; **OR**

I have pending misdemeanor or felony cases or have been convicted of or pleaded guilty to a misdemeanor or felony offense. *(List below any pending cases or convictions that have not been sealed pursuant to R.C. 2953.31-2953.62.)*

| DATE  | TYPE OF CHARGE | COURT NAME | PENDING / CONVICTED / PLEADED GUILTY  |
|-------|----------------|------------|---|
| _____ | _____          | _____      | <input type="checkbox"/> Pending <input type="checkbox"/> Convicted <input type="checkbox"/> Pleased Guilty |
| _____ | _____          | _____      | <input type="checkbox"/> Pending <input type="checkbox"/> Convicted <input type="checkbox"/> Pleased Guilty |
| _____ | _____          | _____      | <input type="checkbox"/> Pending <input type="checkbox"/> Convicted <input type="checkbox"/> Pleased Guilty |
| _____ | _____          | _____      | <input type="checkbox"/> Pending <input type="checkbox"/> Convicted <input type="checkbox"/> Pleased Guilty |

I understand that I have a duty to notify \_\_\_\_\_ within seventy-two  
 (Court Name)  
 hours if the information contained in this affidavit should change.

\_\_\_\_\_  
 Signature of Applicant

SWORN TO, BEFORE ME, and subscribed in my presence, on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
 Notary Public / Deputy Clerk

\_\_\_\_\_  
 Printed Name of Notary Public

Commission Expiration Date: \_\_\_\_\_  
 (Affix seal here)

CASE NO. \_\_\_\_\_

**RELEASE OF RECORDS**

The undersigned hereby releases any and all criminal records, including but not limited to those records that may be expunged, to the Highland County Probate Court Guardianship Investigator.

\_\_\_\_\_

Signature

\_\_\_\_\_

Printed Name

\_\_\_\_\_

Social Security Number

\_\_\_\_\_

Date of Birth



PROBATE COURT OF \_\_\_\_\_ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF \_\_\_\_\_

CASE NO. \_\_\_\_\_

**SELECTION OF GUARDIAN BY MINOR  
OVER FOURTEEN YEARS OF AGE  
(R.C. 2111.12)**

The undersigned hereby selects \_\_\_\_\_  
a resident of \_\_\_\_\_ County, Ohio, as Guardian of the (person and estate), and  
respectfully asked the Court to appoint \_\_\_\_\_  
Guardian.

Signature

Date of Birth

\_\_\_\_\_

\_\_\_\_\_

PROBATE COURT OF \_\_\_\_\_ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF \_\_\_\_\_

CASE NO. \_\_\_\_\_

**FIDUCIARY'S ACCEPTANCE**

**GUARDIAN**

[R.C. 2111.14]

I, the undersigned, hereby accept the duties which are required of me by law, and such additional duties as are ordered by the Court having jurisdiction.

**AS GUARDIAN OF THE ESTATE, I WILL:**

1. Make and file an inventory of the real and personal estate of the ward within 3 months after my appointment.
2. Deposit funds which come into my hands in a lawful depository located within this state.
3. Invest surplus funds in a lawful manner.
4. Make and file an account biennially, or as directed by the Court.
5. File a final account within 30 days after the guardianship is terminated.
6. Inventory any safe deposit box of the ward.
7. Preserve any and all Wills of the ward as directed by the Court.
8. Expend funds only upon written approval of the Court.
9. Make and file a guardian's report biennially, or as directed by the Court.

**AS GUARDIAN OF THE PERSON, I WILL:**

1. Protect and control the person of my ward, and make all decisions for the ward based upon the best interest of the ward.
2. Provide suitable maintenance for my ward when necessary.
3. Provide such maintenance and education for my ward as the amount of the estate justifies if the ward is a minor and has no parents, or has a parent who fails to maintain and educate the ward.
4. Make and file a guardian's report biennially, or as directed by the Court.
5. Obey all orders and judgments of the Court pertaining to the guardianship.
6. Obtain the written approval of the Court before executing a caretaker power of attorney authorized by R.C. 3109.52.

**If I change my address or the ward's address, I shall immediately notify Probate Court in writing.** I acknowledge that I am subject to removal as such fiduciary if I fail to perform such duties. I also acknowledge that I am subject to possible penalties for improper conversion of the property which I hold as such fiduciary.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Fiduciary