PROBATE COURT OF STARK COUNTY, OHIO

DIXIE PARK, JUDGE

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), _____

THE 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 _____

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).

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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

_____
Typed or Printed name

_____
Street

_____
City State Zip

_____
Phone number (include area code)

_____
Supreme Court Registration Number

_____
Applicant

_____
Typed or Printed name

_____
Street

_____
City State Zip

_____
Phone number (include area code)