

PROBATE COURT OF FRANKLIN COUNTY, OHIO
JEFFREY D. MACKEY, JUDGE

IN THE MATTER OF
THE GUARDIANSHIP OF _____

CASE NO. _____

**APPLICATION FOR APPOINTMENT OF GUARDIAN
OF ALLEGED INCOMPETENT**
[R.C.2111.03]

Initial Appointment Successor Appointment

1. Applicant represents to the court that _____ resides or has a legal
settlement at _____ in **FRANKLIN**
County, Ohio and that the prospective ward is incompetent by reason of R.C. 2111.01 (D). Please describe
Prospective Ward's incompetency: _____

2. The Prospective Ward's date of birth is: _____

3. The Applicant's date of birth is: _____

4. Applicant's relationship to Prospective Ward is: _____

5. Does the Applicant or the Prospective Ward require an interpreter to understand English?
 No Yes; If yes, who requires an interpreter? _____
What language? _____

6. A Statement of Expert Evaluation is attached. (Form 17.1A)

7. A list of Next of Kin of Prospective Ward is also attached. (Form 15.0)

8. The whole estate of the Prospective Ward is estimated as follows:
Personal Property\$ _____
Real Estate\$ _____
Annual Rents\$ _____

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Other annual income\$_____

9. Applicant offers the attached bond in the amount of (at least twice value of personal property under R.C. 2109.04) \$_____

10. Applicant represents that Applicant is not an administrator, executor or fiduciary of an estate wherein the Prospective Ward is interested.

11. Applicant represents that a guardian of the Prospective Ward is necessary in order that the Prospective Ward's person the Prospective Ward's property may be taken proper care of, and asks that a guardian be appointed.

12. TYPE OF GUARDIANSHIP APPLIED FOR IS: (Check the applicable boxes)

- Person and Estate Estate Only Person Only
- Non-Limited Limited Interim Emergency

13. If limited guardianship is applied for, the limited powers requested are: _____

14. The time period requested is indefinite, or limited to the following specific time period: _____

15. Applicant has has not been charged with, or convicted of, a crime involving theft, physical violence, sexual abuse, alcohol abuse, or substance abuse. If the Applicant has been charged, or convicted, list the date and place of each charge and each conviction:

Charge/Conviction	Date	Place
_____	_____	_____
_____	_____	_____
_____	_____	_____

16. Applicant represents that the Prospective Ward had military service:

Military ID: _____

Branch of Service: _____

Dates of Services _____

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17. To the best of your ability, list the Prospective Ward's prescription and over-the-counter medications:

18. To the best of your ability, list all public and/or private assistance the Prospective Ward receives (Ex: Medicaid, Medicare, private insurance, SSDI, etc.): _____

19. Applicant represents that the Prospective Ward has a representative payee. List representative payee information: _____

20. Applicant represents that a guardian has been nominated in writing, in a Will, or in a Power of Attorney. The nominated person is: _____

21. The nominated person's contact information is listed on Form 15.0 - Next of Kin.

22. A copy of the document which nominates the guardian is attached.

23. Applicant represents that the address provided below is the Applicant's permanent address and acknowledges the requirement that the Court be notified of any change of address. Removal may result from failure to comply with this requirement.

Attorney for Applicant's Signature

Applicant's Signature

Typed or Printed Name

Typed or Printed Name

Address

Address

City, State, Zip Code

City, State, Zip Code

Telephone Number (include area code)

Telephone Number (include area code)

Attorney's Registration No.

Applicant E-mail