PROBATE COURT OF FRANKLIN COUNTY, OHIO
ROBERT G. MONTGOMERY, JUDGE

IN THE MATTER OF
THE GUARDIANSHIP OF_____

CASE NO. _____

ATTENTION GUARDIANSHIP APPLICANTS

At the time of the filing of the Application For Guardianship of the person, or estate of a minor, you need the following:

1. A completed packet of forms - all forms must be signed in ink.
2. The minor(s) birth certificate.
3. The minor(s) social security card.
4. Application fee of $124.00 **(Cash, credit card, money order or law firm check. No personal checks.)**
5. Fingerprint fee of $22.00 per applicant. (If obtained through Court)
6. Any minor fourteen (14) years of age or older, must come into court at least seven (7) days **prior** to their hearing date for personal service of the Notice Of Hearing and opportunity to sign Selection Of Guardian.

At the time of the Guardianship hearing you must bring the following:

1. Any paperwork not completed from the application packet.
2. A hearing fee of (at least) $40.00 **(Cash, credit card, money order or law firm check. No personal checks.)**

NOTICE: Unless continued for good cause, failure to appear at the scheduled hearing will result in your case being dismissed. Your costs will not be returned.

www.franklincountyohio.gov/probate
Guardianship Department 614-525-3841
373 South High Street, Floor 22, Columbus, Ohio 43215

PROBATE COURT OF FRANKLIN COUNTY, OHIO

ROBERT G. MONTGOMERY, JUDGE

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

APPLICATION FOR APPOINTMENT OF GUARDIAN (MINOR)

Applicant represents that _____ is a minor and is in need of a guardian (O.R.C. 2111.02), and the following:
Note: If space allotted is inadequate to respond, write "See Exhibit" in the space and add appropriate exhibit letter sequence, then attach exhibit containing information requested for that space.

1. TYPE OF GUARDIANSHIP FOR WHICH APPLICATION IS MADE:

   A. ☐ Non-Limited ☐ Limited ☐ Interim

   B. ☐ Person and Estate ☐ Estate Only ☐ Person Only

2. IF THE APPLICATION IS FOR A LIMITED GUARDIANSHIP:

   A. The length (time period) of the guardianship requested is:

      (1) ☐ Indefinite

      (2) ☐ Definite from _____ 20 ____

      to _____ 20 ____

   B. The limited powers granted to the guardian are:

      _____

      _____

      _____

      _____

3. IF THE APPLICATION IS FOR A GUARDIANSHIP OF THE ESTATE:

   A. The whole estate of the prospective ward is:

      Personal Property . . . . . $ _____

      Real Property . . . . . _____

      Annual Rents (Include all income from every source) . . . . . _____

      TOTAL _____

   B. A bond in the amount of $ _____ is attached as Exhibit A. (O.R.C. 2109.04)(A)(1).

4. LIST OF NEXT OF KIN OF THE MINOR FOR SERVICE OF NOTICE, AND WAIVER(S), IF ANY, ARE ATTACHED AS EXHIBIT B.

5. INFORMATION CONCERNING THE PROSPECTIVE GUARDIAN/APPLICANT:

A. Name and AKA _____

Home Address _____

_____ ZIP _____

Relationship to Minor _____

Occupation _____

Work Address _____

_____ ZIP _____

Telephone: Home _____ Work _____

D.O.B. _____

B. Applicant **(is/is not)** an administrator, executor, or other fiduciary of the estate wherein the minor has an interest. (O.R.C. 2111.09).

C. Applicant **(has/has not)** been charged with, or convicted of, a crime involving theft; physical violence; or sexual, alcohol, or substance abuse. If the Applicant has been so charged or convicted, list dates and places of the charge(s) or conviction(s), [O.R.C. 2111.03(A)]:

Charge/Conviction	Date	Place

6. INFORMATION CONCERNING THE MINOR:

A. Full Name and AKA _____
Age _____ Date of Birth _____ Male ____ Female ____
Legal settlement or residence is: _____
City, State, Zip _____
in _____ County, Ohio Telephone _____
Length of that residence is _____

B. School Minor will attend while under guardianship _____
_____ School's telephone: _____

C. If the minor is living at an address different from the residence shown in Section 6-A above, that address is:
_____
_____

D. Name of person, other than minor, who may be contacted at the address where the minor is living:
Name: _____ Telephone: _____

E. In the event of the death or incapacity of the applicant/guardian, the Court should contact the nearest friends or relatives whose names and addresses are:
Name: _____ Telephone: _____
Address: _____
_____ Zip _____
Name: _____ Telephone: _____
Address: _____
_____ Zip _____
Name: _____ Telephone: _____
Address: _____
_____ Zip _____

F. Reasons for the guardianship are: (O.R.C. 2111.06)

_____

_____

_____

_____

G. If the minor's age is over 14 years, he/she (does/doesnot) consent to the selection of the applicant as guardian. Consent is attached as Exhibit C.

H. The person who has custody of the Minor is _____ _____ and the address is _____ _____

I. A certified copy of the minor's birth certificate is attached as Exhibit D.

J. A custody affidavit pursuant to O.R.C. 3109.27 is attached as Exhibit E.

K. I acknowledge that a parent of the ward can withdraw their consent to the guardianship at a later time and this Court may then terminate this guardianship or certify it to Juvenile Court for further action.

I hereby petition the court to be appointed guardian of the foregoing described minor and 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 Signature	Applicant Signature
Attorney's Printed Name	Applicant's Printed Name
Address	Address
City, State, Zip Code	City, State, Zip Code
( ) Telephone	( ) Telephone

PROBATE COURT OF FRANKLIN COUNTY, OHIO

ROBERT G. MONTGOMERY, JUDGE

ESTATE OF
GUARDIANSHIP OF INCOMPETENT
TRUST OF _____ , DECEASED

CASE NO._____

ENTRY SETTING HEARING

The Court orders that a hearing be set on the _____ day of _____, 20_____ at

_____ o'clock _____ m. to consider: _____

_____

_____

as filed on the _____ day of _____, 20 _____ . The hearing will be held in Probate Court,

Franklin County Courthouse, 373 South High Street, 22nd Floor, Columbus, Ohio 43215-6311.

The Court orders the person requesting this hearing to serve notice as required and file the proof of service.

_____
Robert G. Montgomery
Probate Judge

Hearing requested by:

_____
Attorney

_____
Attorney Registration No.

_____
Applicant

_____
Address

_____
City, State, Zip Code

( )
_____
Telephone

PROBATE COURT OF FRANKLIN COUNTY, OHIO

ROBERT G. MONTGOMERY, JUDGE

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

SPOUSE, CHILDREN AND NEXT OF KIN OF PROPOSED WARD

[R.C. 2111.04]

The following are proposed ward's spouse, children, and the lineal descendants of deceased children. If none, the following are proposed ward's next of kin who would be entitled to inherit under the statutes of descent and distribution.

(NOTE: List the name and address of the minor next of kin's parent, guardian or custodian on the name and address lines following the minor next of kin's address.)

Service Waived		Date of Birth	Relationship
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 FRANKLIN COUNTY, OHIO

ROBERT G. MONTGOMERY, JUDGE

IN THE MATTER OF GUARDIANSHIP OF _____

CASE NO. _____

WAIVER OF NOTICE

We, the undersigned, do each of us hereby waive the issuing and service of notice, voluntarily enter our appearance herein and consent to the appointment of _____ as guardian of the above named person.

_____ _____

_____ _____

_____ _____

_____ _____

FOR GUARDIANSHIP OF MINOR
SIGN WAIVER OF NOTICE BEFORE A NOTARY PUBLIC/DEPUTY CLERK

Sworn to/acknowledged before me this _____ day of _____, 20_____.

_____
Notary Public

_____
Expiration Date

PROBATE COURT OF FRANKLIN COUNTY, OHIO

ROBERT G. MONTGOMERY, JUDGE

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

GUARDIAN — FIDUCIARY'S ACCEPTANCE

[R.C. 2111.13, 2111.14, & 2111.15]

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

AS GUARDIAN OF THE PERSON AND/OR ESTATE, I WILL:

1. Preserve any and all Wills of the ward and deposit them with the Court for safekeeping.
2. Prepare and file a guardian's report annually, or as directed by the Court when the ward is an adult.
3. Allow my name, address, and telephone number to appear in the Court's docket and be accessible through the Court's website.
4. **Immediately notify Probate Court in writing if I change my address or the ward's address.**

AS GUARDIAN OF THE PERSON, I WILL:

1. Protect and control the person of my ward, and make all decisions on behalf of the ward based upon the ward's best interest.
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 father or mother, or has a father or mother who fails to provide maintenance or education.
4. Obey all orders and judgments of the Court touching the guardianship.
5. Authorize or approve medical, health, or other professional care, counsel, treatment, or service.
6. Obtain the written approval of the Court before executing a caretaker power of attorney authorized by R.C.3109.52.

AS GUARDIAN OF THE ESTATE, I WILL:

1. Prepare 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. **Guardianship checking accounts must provide canceled checks, as these canceled checks must be displayed when filing accounts.**
3. Invest surplus funds in a lawful manner.
4. Prepare and file an account annually.
5. File a final account within 30 days after the guardianship is terminated.
6. Inventory any safe deposit box of the ward.
7. Expend funds only upon written approval of the Court.

The duties of a fiduciary shall be those required by law, and such additional duties as the Court orders. Letters of appointment shall not issue until a fiduciary has executed a written acceptance of his/her duties, acknowledging that he/she is subject to removal for failure to perform his/her duties, and that he/she is subject to possible penalties for conversion of property he/she holds as a fiduciary. The written acceptance may be filed with the application for appointment.

_____ Date

_____ Fiduciary

PROBATE COURT OF FRANKLIN COUNTY, OHIO

ROBERT G. MONTGOMERY, JUDGE

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

STATEMENT OF ADDITIONAL INFORMATION

(To be completed when seeking Guardianship of a minor)

Now comes the applicant for the appointment of guardian of the person of the above minor and answers the following questions with respect to the propspective ward to the best of their knowledge:

1. Specifically, is the minor ward eligible for or receiving **any** of the following benefits, and if so, where are they or their source located?

TYPE	NAME	AMOUNT PER MONTH
Social Security		$
P.E.R.S.		
Veterans Admin		
R.R. Retirement		
Employee's Pension		
Insurance Benefits		
ADC		
SSI/SSD		
Other		
Other		

_____
Applicant

Data Save Enabled

PROBATE COURT OF FRANKLIN COUNTY, OHIO
ROBERT G. MONTGOMERY, JUDGE

IN THE MATTER OF
THE GUARDIANSHIP OF _____

CASE NO. _____

AFFIDAVIT
[ORC 3127.23]

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

Affiant being first duly sworn, deposes and states:
1. That the present address, the places where the child has lived within the last five years, and the names and present addresses of the person with whom the child has lived during that period are:

From: _____ to _____ With _____

At _____

Current address _____

From: _____ to _____ With _____

At _____

Current address _____

From: _____ to _____ With _____

At _____

Current address _____

From: _____ to _____ With _____

At _____

Current address _____

From: _____ to _____ With _____

At _____

Current address _____

From: _____ to _____ With _____

At _____

Current address _____

CASE NO. _____

2. Said affiant (circle one) HAS/HAS NOT participated as a party, witness, or in any other capacity in any other litigation in this or any other state, that concerned the allocation, between the parents of the same child, of potential rights and responsibilities for the care of the child and the designation of the residential parent and legal custodian of the child or that otherwise concerned the custody of the same child.

3. Said affiant (circle one) DOES/DOES NOT HAVE information of any parenting proceeding concerning the child pending in a court of this or another state.

4. Said affiant (circle one) DOES/DOES NOT KNOW of any person who is not a party to the proceeding and has physical custody of the child or claims to be a parent of the child who is designated the residential parent and legal custodial of the child or to have visitation rights with respect to the child or to be a person other than a parent of the child who has custody or visitation rights with respect to the child.

5. Said affiant (circle one) HAS/HAS NOT been convicted of or pleaded guilty to any criminal offense involving any act that resulted in a child being an abused child or a neglected child or previously has been determined, in a case which a child has been adjudicated an abused child or a neglected child, to be the perpetrator of the abusive or neglectful act that was the basis of the adjudication.

6. Said affiant has a continuing duty to inform the court of any parenting proceeding concerning the child in this or any other state of which the affiant obtained information during this proceeding.

Said affiant has the following knowledge regarding information set forth in paragraphs two (2) through five (5) above:

_____

_____

_____

_____

Said affiant states that all of the foregoing statements are true.

_____
Affiant/Applicant

Sworn to and subscribed before me a Notary Public or Deputy Clerk of the Probate Court on this _____ day of

_____ , 20 _____.

_____
Notary Public/Deputy Clerk

PROBATE COURT OF FRANKLIN COUNTY, OHIO

ROBERT G. MONTGOMERY, JUDGE

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

GUARDIAN'S CREDIBILITY APPLICATION

Name of Alleged Incompetent _____

Name of Applicant to be Appointed Guardian _____ Date of Birth _____

Applicant's Current Address _____

_____ From _____

5 YRS. ONLY

Previous Address _____

_____ From/To _____

Previous Address _____

_____ From/To _____

Spouse's Name _____ Years Married _____

Address _____

Applicant's Employer _____ From _____

5 YRS. ONLY

Previous Employer _____ From/To _____

Previous Employer _____ From/To _____

_____ ☐ Checking ☐ Savings ☐ Safe Deposit Box

Name of Applicant's Bank

_____ ☐ Checking ☐ Savings ☐ Safe Deposit Box

Name of Applicant's Bank

Has Applicant Ever Filed Bankruptcy?..... ☐ Yes ☐ No
Has Applicant Ever Been Garnished?..... ☐ Yes ☐ No
Has Applicant Ever Been in Receivership?..... ☐ Yes ☐ No
Has Applicant Ever Been Convicted of a Felony?..... ☐ Yes ☐ No
Has Applicant Had Experience in Handling Investments in Marketable Securities?..... ☐ Yes ☐ No

Describe that Experience _____

_____

This statement is made in support of my application to be appointed Guardian in the above styled matter and the undersigned says that the facts stated in the foregoing applications are true.

_____
Signature of Applicant

PROBATE COURT OF FRANKLIN COUNTY, OHIO

ROBERT G. MONTGOMERY, JUDGE

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 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 understand the above information.

_____
Applicant

_____
Date

PROBATE COURT OF FRANKLIN COUNTY, OHIO

ROBERT G. MONTGOMERY, JUDGE

ADOPTION OF
GUARDIANSHIP OF _____

CASE NO. _____

WEBCHECK WAIVER

I hereby certify that I have given the Franklin County Probate Court permission to obtain all criminal history information pertaining to me in the files of the Ohio Bureau of Criminal Identification and Investigation (BCI&I).

By placing my fingerprint images on the WEBCHECK Scanner, I am authorizing BCI&I to release criminal history information about me to the person(s)/agencies identified in this request for a period of one year from the date of this transaction.

I hereby release BCI&I and any and all individuals identified in this request from all liability in connection with the dissemination of such criminal history information.

Further, I understand that my criminal history information received from BCI&I will be filed in the Court's record and such record may be public.

_____ _____

Applicant's Signature Date

_____

Print Name

PROBATE COURT OF FRANKLIN COUNTY, OHIO

ROBERT G. MONTGOMERY, JUDGE

IN THE MATTER OF GUARDIANSHIP OF _____

CASE NO. _____

NOTICE TO APPLICANT

You have applied to become the guardian in the above captioned matter. Section 2111.02 of the Ohio Revised Code requires you to appear at the hearing which will be conducted at this court on the _____ day of _____ 20____ at _____ o'clock ___.m. This Court is located at 373 South High Street, 22nd floor, Columbus, Ohio 43215. If you fail to appear for the hearing at the time scheduled your application for guardianship will be dismissed without notice to you. Notice of the dismissal will be given to the board of education.

ACKNOWLEDGMENT

I have read the above notice and understand that if I fail to appear for the above hearing, my application for guardianship will be dismissed without notice to me. Should I reopen this matter, I will need to repay the entire application filing fee plus any other additional Court costs except for the fee for the case number.

_____ Date

_____ Signature of Applicant

PROBATE COURT OF FRANKLIN COUNTY, OHIO

ROBERT G. MONTGOMERY, JUDGE

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

NON-PUBLIC RECORD SOCIAL SECURITY INFORMATION

INFORMATION CONCERNING THE ALLEGED INCOMPETENT OR MINOR:

Social Security Number _____

INFORMATION CONCERNING THE PROSPECTIVE GUARDIAN/APPLICANT:

Name _____

Social Security Number _____

Submitted by:

_____
Applicant's Signature

_____
Applicant's Printed or Typed Name

THIS FORM WILL NOT BE KEPT IN THE COURT'S PUBLIC RECORDS

PROBATE COURT OF FRANKLIN COUNTY, OHIO
ROBERT G. MONTGOMERY, JUDGE

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

INFORMATION ON CUSTODIAL ACCOUNT FUNDS

When a Guardianship of an Estate or of a Person and Estate is being filed and the funds are to be placed into a Custodial Account the following information MUST be available at the time of the hearing:

If funds are from:	Bring or supply copy:
1. An Insurance Company:	Name of Company, Policy Number, Name of Insured
2. An Estate:	Decedent's Name, Court Case Number County, State
3. The Ohio Court of Claims, Victims of Crime:	Victim's Name
4. Existing accounts to be placed into Custodial: .	Original certificate and/or passbooks.

NOTE: CUSTODIAL PAPERS OR SURETY BOND MUST BE FILED BEFORE LETTERS OF GUARDIANSHIP WILL BE ISSUED.

NOTE: If possible the Guardian's Inventory should be filed at this time.

Reset Forms