

IN THE PROBATE COURT OF _____ COUNTY

STATE OF GEORGIA

IN RE: _____) ESTATE NO. _____
 _____)
 _____) PETITION FOR TEMPORARY LETTERS
 _____) OF GUARDIANSHIP OF MINOR
 MINOR _____)

TO THE HONORABLE JUDGE OF THE PROBATE COURT:

The petition of _____, who is/are
 domiciled at (physical address) _____,
 _____ County, who has/have actual physical custody of the minor named above, and whose
 mailing address(es) is/are _____
 _____ shows:

1.

The minor, _____,
 currently is located in the county in which this petition is being filed, is _____ years old with a date of
 birth of _____. The minor's current address is _____

A copy of the minor's birth certificate is attached as exhibit "A."

2.

Said minor is in need of a temporary guardian. The Petitioner(s) has/have the following relationship with
 the minor: _____

3.

The minor's mother, _____, (initial all that apply)

- _____ a. is not a natural guardian of the minor because her parental rights have been terminated or she has surrendered them;
- _____ b. has sole legal custody of the minor;
- _____ c. has joint legal custody of the minor;
- _____ d. has selected petitioner(s) to serve as temporary guardian(s) (see attached notarized acknowledgment and consent);
- _____ e. is deceased, and a copy of her death certificate is attached as exhibit "B;"
- _____ f. has not consented to the creation of the temporary guardianship and her (current physical address county of residence is _____

located in _____ County) (current address is
 unknown

4.

(initial either a., b or c:)

_____ a. The minor was born during a marriage. The father of the minor, _____, (initial all that apply)

- _____ (i) is not a natural guardian of the minor because his parental rights have been terminated or he has surrendered them;
- _____ (ii) has sole legal custody of the minor;
- _____ (iii) has joint legal custody of the minor;
- _____ (iv) has selected petitioner to serve as temporary guardian (see attached notarized acknowledgment and consent);
- _____ (v) is deceased, and a copy of his death certificate is attached as exhibit "C;"
- _____ (vi) has not consented to the creation of the temporary guardianship and his (current physical address is _____, located in _____ County) (current address is unknown).

_____ b. The minor was born out of wedlock. The biological father of the minor, _____, has not legitimated the minor.

_____ c. The minor was born out of wedlock AND the father of the minor legitimated the minor. The father of the minor, _____, (initial all that apply)

- _____ (i) is not a natural guardian of the minor because his parental rights have been terminated or he has surrendered them;
- _____ (ii) has sole legal custody of the minor;
- _____ (iii) has joint legal custody of the minor;
- _____ (iv) has selected petitioner to serve as temporary guardian (see attached notarized acknowledgment and consent);
- _____ (v) is deceased, and a copy of his death certificate is attached as exhibit "C;"
- _____ (vi) has not consented to the creation of the temporary guardianship and his (current physical address is _____, located in _____ County) (current address is unknown).

5.

(initial if applicable)

_____ a. The minor, being over fourteen years of age, has selected the petitioner(s) to act as temporary guardian(s) as shown by the attached selection.

6.

NOTE: complete the following unless both parents have signed the attached notarized acknowledgment and consent:

The temporary guardianship is needed because _____

7.

Additional Data: Where full particulars are lacking, state here the reasons for any such omission. Also, state here all pertinent facts which may govern the method of giving notice to any party and which may determine whether or not a guardian ad litem should be appointed for any party.

WHEREFORE, petitioner(s) pray(s) that

1. service be perfected as provided by law and
2. petitioner(s) be appointed temporary guardian(s) of the minor named above.

Signature of first petitioner	Signature of second petitioner, if any
Printed Name	Printed Name
Address	Address
Telephone Number	Telephone Number
Signature of Attorney:	
Typed/printed name of Attorney:	
Address:	
Telephone:	State Bar #

VERIFICATION

GEORGIA, _____ COUNTY

Personally appeared before me the undersigned petitioner(s) who on oath state(s) that the facts set forth in the foregoing petition are true.

Sworn to and subscribed before me this ____ day of _____, 20____.

First Petitioner

NOTARY/CLERK OF PROBATE COURT
My Commission Expires _____

Printed Name

Sworn to and subscribed before me this ____ day of _____, 20____.

Second Petitioner, if any

NOTARY/CLERK OF PROBATE COURT
My Commission Expires _____

Printed Name

**ACKNOWLEDGMENT AND CONSENT TO CREATION OF TEMPORARY GUARDIANSHIP
AND APPOINTMENT OF INDIVIDUAL(S) AS TEMPORARY GUARDIAN(S)**

IN RE: ESTATE OF _____ ESTATE NO. _____

I/We, _____, the **mother/father**
of _____, **minor**, do hereby
consent to the creation of a temporary guardian and the appointment of (list all parties to whom you wish
to **grant temporary guardianship**) _____
_____ and also acknowledge service of the petition for the appointment of a temporary
guardian for said minor, and waive any and all further service and notice concerning said petition.

_____ (Initial) I/We do hereby consent to the above named temporary guardian removing the
minor from the state of Georgia pursuant to O.C.G.A. § 29-2-22(b)(1) and (c) and establishing his/her
dwelling (permanently)(temporarily) in the state of _____.

I/We further understand that pursuant to O.C.G.A. § 29-2-8(b), **upon application by a natural
guardian** (as defined in said statute; see Instructions), the court will remove the temporary guardian and
dissolve the temporary guardianship unless an objection is timely filed by the temporary guardian. If an
objection is timely filed to such an application, the juvenile court or the probate court shall determine,
after notice and hearing, whether a continuation or dissolution of the temporary guardianship is in the
best interest of the minor. I/We understand that nothing herein, including any optional assumption by
the guardian of the obligation to support the minor to the extent that no other sources of support are
available, affects my/our legal obligation to support and maintain said minor.

Sworn to and subscribed before
me this ____ day of _____, 20____.

Notary Public/Clerk, Probate Court
My Commission Expires _____

Mother Signature

Printed Name

Address

Telephone Number

Sworn to and subscribed before
me this ____ day of _____, 20____.

Notary Public/Clerk, Probate Court
My Commission Expires _____

Father Signature

Printed Name

Address

Telephone Number

ASSUMPTION OF OBLIGATION TO SUPPORT (OPTIONAL)

IN RE: ESTATE OF _____ ESTATE NO. _____

The undersigned, if appointed temporary guardian(s) of _____, minor, assume(s) the obligation to support the minor while the guardianship is in effect to the extent that no other sources of support are available.

Sworn to and subscribed before
me this ____ day of _____, 20____.

Petitioner

Clerk, Probate Court/Notary Public
My Commission Expires _____

Printed Name

Sworn to and subscribed before
me this ____ day of _____, 20____.

Co-Petitioner

Clerk, Probate Court/Notary Public
My Commission Expires _____

Printed Name

IN THE PROBATE COURT OF _____ COUNTY

STATE OF GEORGIA

IN RE: ESTATE OF

) ESTATE NO. _____
)
)
)

_____,
MINOR

) PETITION FOR TEMPORARY LETTERS
) OF GUARDIANSHIP OF MINOR
)
)

_____,
TEMPORARY GUARDIAN(S)

OATH

I/We do solemnly swear (or affirm) that I/we will well and truly perform the duties required of me/us as temporary guardian(s) of the minor named above.

Sworn to and subscribed before
me this ____ day of _____, 20____.

Temporary Guardian

JUDGE /CLERK OF PROBATE COURT

Printed Name

Sworn to and subscribed before
me this ____ day of _____, 20____.

Co-Temporary Guardian, if any

JUDGE /CLERK OF PROBATE COURT

Printed Name

MINOR: _____

CONSENT TO CRIMINAL BACKGROUND CHECK

In conjunction with the legal action filed in that Court, I hereby authorize the Probate Court of Gwinnett County to ask for and receive any criminal history record information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia, in any state or local criminal justice agency in any state in the United States or its territories, and in the Federal Bureau of Investigation.

Should the Probate Court of Gwinnett County deem it appropriate that the legal action filed in that Court be referred for hearing to the Juvenile Court of Gwinnett County, I further authorize the Juvenile Court of Gwinnett County to ask for and receive any criminal history record information pertaining to me which may be in the files of any state or local criminal agency in Georgia, in any state or local criminal justice agency in any state in the United States or its territories, and in the Federal Bureau of Investigation.

I understand that Section 7 of the Privacy Act (found at 5 U.S.C. § 552a note [Disclosure of Social Security Number]) provides that "[I]t shall be unlawful for any Federal, State or local government agency to deny to any individual any right, benefit, or privilege provided by law because of such individual's refusal to disclose his social security account number." Sec. 7(a)(1).

"Any Federal, State or local government agency which requests an individual to disclose his social security account number shall inform that individual whether that disclosure is mandatory or voluntary, by what statutory or other authority such number is solicited, and what uses will be made of it." Sec. 7(b).

I understand that the purpose of providing my Social Security Number is to perform a criminal background check based on my application for guardianship/conservatorship under Title 29 of the Official Code of Georgia, Annotated, in order for this Court to determine my fitness to act as a guardian/conservator.

I further understand providing this number is voluntary and that, while no legal proceeding or service shall be denied by this office for declining to provide a Social Security number, failing to provide this number may result in a delay in issuance of a guardianship/conservatorship as name based searches often result in information which is not applicable to the applicant and which must be more closely scrutinized by the Court.

Social Security Number: _____ Sex: _____ Height _____ Weight _____

Hair Color _____ Eye Color _____ Race _____ Date of Birth _____

Place of Birth:

State: _____ City: _____ County or District _____ Country _____

Full Name Printed

Signature

Address

Signed and sworn to or affirmed before me

This _____ day of _____, 20____.

CLERK OF PROBATE COURT / NOTARY PUBLIC (SEAL)

Name Printed: _____

My Commission Expires: _____

MINOR: _____

CONSENT TO CRIMINAL BACKGROUND CHECK

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Social Security Number: _____ Sex: _____ Height _____ Weight _____

Hair Color _____ Eye Color _____ Race _____ Date of Birth _____

Place of Birth:

State: _____ City: _____ County or District _____ Country _____

Full Name Printed

Signature

Address

Signed and sworn to or affirmed before me
This _____ day of _____, 20____.

CLERK OF PROBATE COURT / NOTARY PUBLIC (SEAL)

Name Printed: _____

My Commission Expires: _____