

PROBATE COURT OF FAYETTE COUNTY GEORGIA
TEMPORARY GUARDIANSHIP PETITION SUPPLEMENT

RE: _____, Minor

Estate No.: _____

The undersigned applicant for temporary guardianship of the above named minor does hereby swear or affirm that:

- 1) There **(has been)** or **(has not been any)** contact with any Department of Family & Children Services office in this state or in the equivalent department of any other state regarding this minor.

If there has been contact/involvement, provide details:

- 2) The minor will be living at the following address:

- 3) If the minor is of age to attend school, will be attending the following school:

- 4) There **(has been)** or **(has not been any)** contact with any other Court (Juvenile, State, Superior, or Probate) in this state or any other state regarding this minor.

If there has been contact/involvement, provide details:

- 4) Within ten (10) days of any change of residence or school of the minor or change in residence of the temporary guardian(s), I will advise the Fayette County Probate Court in writing.

- 5) I am aware of my duty to file personal status reports with the Court.

Proposed Temporary Guardian(s)

Sworn to and subscribed before me

This ____ day of _____, 20__.

Notary public/Clerk, Probate Court

PROBATE COURT OF FAYETTE COUNTY GEORGIA
CONSENT TO CRIMINAL RECORDS CHECK

RE: _____, Minor Estate No.: _____

I hereby authorize the Probate Court of Fayette County to 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.

Full Name: _____
Last First Middle (Maiden)

Address: _____
Street Address City State Zip

Sex Race Date of Birth Social Security Number

Signature of First Guardian

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

Notary Public/Clerk, Probate Court

PROBATE COURT OF FAYETTE COUNTY GEORGIA
CONSENT TO CRIMINAL RECORDS CHECK

I hereby authorize the Probate Court of Fayette County to 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.

Full Name: _____
Last First Middle (Maiden)

Address: _____
Street Address City State Zip

Sex Race Date of Birth Social Security Number

Signature of First Guardian

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

Notary Public/Clerk, Probate Court