

MANDATORY CHECKLIST FOR NONPROFESSIONAL GUARDIANSHIP APPLICATION

This form must be submitted by all nonprofessional guardians with every Application for Appointment as Guardian.

Please fill out the appropriate box for either the initial or renewal application.

Guardianship of _____ Case # _____ Division _____
Format Must Be PRCYNNNNNNNN

Name of Guardian Applicant _____

Any other name(s) used by Guardian Applicant _____

Address of Guardian Applicant _____
Street Address City State Zip

Guardian Applicant's Relationship to Ward _____

Guardian Applicant's SS# _____ Guardian Applicant's DOB _____

Guardian Applicant's Race _____ Guardian Applicant's Sex _____

Name of Guardian Applicant's Spouse _____

Name(s) of Guardian Applicant's Child(ren) _____

Guardian Applicant's Employer _____

Address of Guardian Applicant's Employer _____

Telephone Number of Guardian Applicant's Employer _____

Guardian Applicant's Supervisor _____

INITIAL APPLICATION FOR APPOINTMENT OF NONPROFESSIONAL GUARDIAN

- 1. Mandatory Checklist Yes
- 2. Application for Appointment Attached
- 3. Fingerprints Submitted electronically
- 4. Check in the amount of \$50.00 payable to the Broward County Clerk of Court
(Court Monitor Criminal/Credit Investigation) Attached Waived by Court
- 5. Request Copy of Court Monitor Results Yes No
(If yes, include a self-addressed, stamped envelope and check in the amount of \$1.00 payable to the Broward County Clerk of Court.)

RENEWAL APPLICATION FOR NONPROFESSIONAL GUARDIANS

- 1. Mandatory Checklist Yes
- 2. Application for Appointment Attached
- 3. Check in the amount of \$50.00 payable to the Broward County Clerk of Court
(Court Monitor Criminal/Credit Investigation) Attached Waived by Court
- 4. Certificate for Education Requirement Attached Waived by Court
(Copy only, see Fl. Prob. R. 5.625)
- 5. Request Copy of Court Monitor Results Yes No
(If yes, include a self-addressed, stamped envelope and check in the amount of \$1.00 payable to the Broward County Clerk of Court.)

I hereby give my consent for a background check in accordance with chapter 744, Florida Statutes including, but not limited to, a credit history investigation, an FDLE, FBI, employment, and Department of Children and Families background check.

Under penalties of perjury, I declare that I have read the foregoing and the facts alleged are true.

Guardian Applicant's Signature _____ Date _____
Name [_____]