## **PROBATE COURT OF BUTLER COUNTY, OHIO**

## IN THE MATTER OF GUARDIANSHIP OF \_\_\_\_\_

Case No. \_\_\_\_\_

## APPLICATION FOR APPOINTMENT OF GUARDIAN OF MINOR

[R.C. 2111.03(C)]

Applicant, a resident of \_\_\_\_\_ County, Ohio, hereby applies for the appointment of (himself) (herself) or some suitable person as guardian of the following minor and represents that the applicant is not an administrator, executor, or other fiduciary of an estate wherein the minor is interested.

Name of Minor	Age	Date of Birth	Residence or Legal Settlement
		15.0)	
Attached is a list of the ne	ext of kin of the minor. (F	orm 15.0)	
A guardian is necessary be	ecause (R.C. 2111.06),		
	-		
THE TYPE OF GUARDIANSHIP	APPLIED FOR IS		
Non-Limited	Limited	Person and Estate	
Estate Only	Person Only		
IF THE APPLICATION IS FOR I	IMITED GUARDIANSHI	),	
The length (time period) o	f the guardianship reque	sted is:	
Indefinite	Definite to the	day of	,
The limited powers reques	sted are:		

Applicant attaches affidavit pursuant to R.C. 3127.23.

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The Applicant (or other suitable person) has has not been charged with or convicted of a crime involving theft, physical violence, or sexual, alcohol or substance abuse except as follows (if applicable, state date and place of each charge or each conviction.)

The whole estate of said minor is estimated as follows:

Personal property		\$
Real estate		\$
Annual rents		\$
Other annual income		\$
	Total	\$
	Total	Ψ
Applicant offers the attached bond in the amount of		<u>\$</u>

I hereby 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 for applicant	Applicant 1
Typed or printed name	Typed or printed name
Street	Street
City, State, Zip	City, State, Zip
Phone number (include area code)	Phone number (include area code)
Supreme Court Registration Number	
	Applicant 2
	Typed or printed name
	Street
	City, State, Zip
	Phone number (include area code)

4-1-2004