

PROBATE COURT OF BUTLER COUNTY, OHIO
JOHN M. HOLCOMB, JUDGE

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
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Attached is a list of the next of kin of the minor. (Form 15.0)

A guardian is necessary because (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 LIMITED GUARDIANSHIP,

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

Indefinite Definite to the _____ day of _____, _____.

The limited powers requested 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	\$ _____
Applicant offers the attached bond in the amount of	\$ _____

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

Typed or printed name

Street

City, State, Zip

Phone number (include area code)

Supreme Court Registration Number

Applicant 1

Typed or printed name

Street

City, State, Zip

Phone number (include area code)

Applicant 2

Typed or printed name

Street

City, State, Zip

Phone number (include area code)