

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

**IN THE MATTER OF THE GUARDIANSHIP OF:**

**CASE NO.:**

**APPLICATION OF GUARDIAN TO PROVIDE DIRECT SERVICES TO  
WARD** [Sup.R. 66.01(B) and 66.09(G)]

“Direct Services” are defined in Sup.R. 66.01(B) as “services typically provided in exchange for compensation by home and community-based care and institutionally-based care providers, including medical and nursing care, care or case management services, care coordination, speech therapy, occupational therapy, physical therapy, psychological services, counseling, residential, legal representation, job training, and any other similar services. The term 'direct services' does not include services of a guardian.”

Sup.R. 66.09(G) prohibits “Direct Services” by a guardian to a ward, unless otherwise approved by the court.

I, as Guardian of \_\_\_\_\_ (Ward), Case No. \_\_\_\_\_, am requesting the Court to grant me authorization to be a paid provider (care, transportation, or both – circle the appropriate choice) to the Ward and still remain as Guardian of person/estate and waive the prohibitions as stated in Sup.R. 66.09.

I state (please check all that are applicable and attach additional pages, if necessary):

1. \_\_\_\_ The Guardian’s relationship to the Ward is \_\_\_\_\_.
2. \_\_\_\_ The Guardian of the Ward named above applies to the Court for authority to provide direct services to the Ward.
3. \_\_\_\_ The Guardian of the Ward named above applies to the Court for approval to receive compensation from the state of Ohio or from a third party payor for direct services that they provide or will provide by them to the Ward. The Guardian is not an employee of the state of Ohio or the third party/payor.
4. \_\_\_\_ The Guardian represents to the Court that it is in the Ward’s best interests that this application be approved because:\_\_\_\_\_.
5. \_\_\_\_ Compensation for these services is being paid to the Guardian by \_\_\_\_\_

6. \_\_\_\_ The income the Guardian receives, or will receive, to provide services to the Ward is or is not (circle the appropriate choice) the Guardian's only source of income.

6a. If other sources are received, please list below and the amount received:

7. \_\_\_\_ The Guardian does or does not (circle the appropriate choice) have employment other than providing services to the Ward.

8. \_\_\_\_ The Guardian does or does not (circle the appropriate choice) reside in the same household as the Ward.

9. \_\_\_\_ The income the Guardian receives, or will receive, for providing services to the Ward does Or does not (circle appropriate choice) impair the Guardian's ability to advocate for the Ward.

I also state that I have taken and completed the following required classes for certification (Please submit copies of the certification or letter verifying certification):

I further state that the direct services being provided are:

1. \_\_\_\_ Personal care to a child of the Guardian in the Guardian's residence that may involve personal hygiene, feeding, medicating and/or dressing of the Ward.
2. \_\_\_\_ Transportation
3. Other: \_\_\_\_\_

The Guardian has disclosed this inherent conflict of interest to the Court and requests that the conflict be waived and/or the restrictions in Sup.R. 66.01 through and including 66.09 be waived, to this extent.

\_\_\_\_\_  
Guardian/Applicant's printed name

\_\_\_\_\_  
Guardian/Applicant signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone number

\_\_\_\_\_  
Email address