

## APPLICATION FOR APPOINTMENT AS GUARDIAN

Pursuant to Section 744.3125 of the Florida Guardianship Law, the undersigned submits this Application for Appointment as Guardian of \_\_\_\_\_ (the Ward) and submits the following information (whenever the space provided is insufficient, attach additional pages):

1. Name: \_\_\_\_\_
2. Age: \_\_\_\_\_
3. Residence address: \_\_\_\_\_
4. Mailing address: \_\_\_\_\_
5. U.S. citizen? \_\_\_\_\_
6. Employer's name and address: \_\_\_\_\_  
Applicant's position: \_\_\_\_\_
7. Home telephone number: \_\_\_\_\_  
Work telephone number: \_\_\_\_\_
8. If currently serving as guardian for any other ward, list name of each ward, court file number, circuit court in which the case is pending and whether applicant is acting as the limited or plenary guardian of the person or property or both: \_\_\_\_\_
9. Does applicant have any physical disabilities? \_\_\_\_\_
10. Has applicant ever been treated for the following:
  - a. Mental condition? \_\_\_\_\_
  - b. Alcohol? \_\_\_\_\_
  - c. Drugs? \_\_\_\_\_
  - d. Other? \_\_\_\_\_
11. Has applicant ever been judicially determined to have committed abuse, abandonment or neglect against a child as defined by the Florida Statutes? \_\_\_\_\_
12. Has applicant ever been the subject of a confirmed report of abuse, neglect, or exploitation which has been uncontested or upheld pursuant to the provisions of Section 415.104, Florida Statutes? \_\_\_\_\_
13. Has applicant ever been charged with fraud, misrepresentation or perjury in a judicial or administrative proceeding? \_\_\_\_\_
14. Has applicant ever been charged with, arrested for or convicted of a felony? \_\_\_\_\_
15. Has applicant ever been charged with, arrested for or convicted of any other crimes? \_\_\_\_\_

16. Has applicant ever held a position which required bonding? \_\_\_\_\_
17. Has applicant ever served as guardian of a person or of a person's property? \_\_\_\_\_
18. Has applicant ever been held in contempt of court or removed as guardian? \_\_\_\_\_
19. Has applicant ever filed for bankruptcy? \_\_\_\_\_
20. What is applicant's relationship to the alleged incapacitated person? \_\_\_\_\_
21. Is applicant, or applicant's corporation or other business entity a creditor of, or providing professional, personal or business services to the incapacitated person? \_\_\_\_\_
22. Is applicant employed by a corporation or other entity which is providing professional, personal or business services to the incapacitated person? \_\_\_\_\_
23. Is applicant a health care provider for the alleged incapacitated person? \_\_\_\_\_
24. Educational history of applicant:

Name and Address

Degree

Date

High School:

College:

25. List applicant's employment experience for the past ten (10) years beginning with the most recent date:

Name and Address

Date

Reason for Leaving

26. Was applicant discharged from employment by any employer listed above? \_\_\_\_\_

27. Does applicant possess any special educational qualifications (financial, business or otherwise) that qualify applicant to be appointed guardian? \_\_\_\_\_

28. Has applicant received instruction and training which covered the legal duties and responsibilities of a guardian? \_\_\_\_\_