

**ASHLAND COUNTY PROBATE COURT**  
Karen DeSanto Kellogg, Judge

In Re Guardianship of: \_\_\_\_\_ Case No. \_\_\_\_\_

**INFORMATION REGARDING THE PROPOSED GUARDIAN**  
(to be filed with Application for Guardianship)

The undersigned applicant for guardianship states that the facts set forth herein are made in support of the undersigned's application to be appointed guardian of the above-named person.

**Name:**

**Address:**

**Telephone No.:**

**Place of Employment  
(or retired from):**

**Name of financial institution(s) you bank with and the number of years as a customer:**

**List 3 people, and their addresses and telephone numbers, who will know your whereabouts at all times. Do not list more than one family member and do not list your attorney.**

Person 1:

Person 2:

Person 3:

**List any convictions or guilty pleas to any misdemeanor or felony charge (excluding traffic violations):**            **Check here if none**

**Your relationship to the person for whom you seek to be appointed Guardian:**

**Name, address and telephone number of the attorney who will represent you, if any:**

The applicant states that the answers set forth above are true and correct to the best of the knowledge and belief of the applicant, subject to the penalties for making a false affidavit or declaration.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature