



**GUARDIANSHIP OF
AN INCOMPETENT ADULT**

**JUDGE JAMES W. PETERS
MONROE COUNTY COURT OF COMMON PLEAS
PROBATE DIVISION
101 North Main Street
Woodsfield OH 43793
Tel: (740) 472-1654 or (740) 472-5790
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INSTRUCTIONS FOR APPOINTMENT OF GUARDIAN OF
ALLEGED INCOMPETENT

These instructions are intended as a guideline only and should not be relied upon as a comprehensive list of duties in an emergency guardianship.

A person can apply to be Guardian of the Person, Estate, or Person & Estate of an alleged incompetent when the applicant believes that an adult is incompetent as defined by Statute.

A filing fee of \$200.00 is required at the time of filing. Please confirm the amount with the Clerk since filing fees may have changed subsequent to the publication of this instruction sheet. This fee may be paid in cash, check, money order, credit or debit card. If using a credit or debit card, additional processing fees apply.

The forms may be obtained from the Clerk on the 3rd floor of the Courthouse, 101 North Main Street, Room 39, Woodsfield, Ohio.

PROCEDURAL STEPS:

STEP 1: COMPLETE THE FOLLOWING FORMS FOR THE INITIAL FILING - WHEN TO FILE

Application for Appointment of Guardian of Alleged Incompetent (17.0) Complete information	At time of initial filing
Next of Kin of Proposed Ward (15.0) List all next of kin (those who are closest blood relatives) of the alleged incompetent Be sure to specify complete addresses of all those listed	At time of initial filing
Judgment Entry Setting Hearing on Application for Appointment (15.01) Fill in name of alleged incompetent only, the Judge will fill in hearing date & time and sign & date the form	At time of initial filing
Waiver of Notice and Consent (15.1) Have next of kin of the proposed ward execute form If unable to obtain all waivers, certified mail service must be completed on those that did not sign waivers (See form 16.4)	At time of initial filing if signed by next of kin
Fiduciary's Acceptance (H.C. 15.2) Complete name of proposed ward, sign and date	At time of initial filing

Note: the Court will hold applicant responsible for the duties described on this form.

Authorization to Release Confidential Information
Complete form, sign in presence of witness, and have witness sign. At time of initial filing

Statement of Expert Evaluation
Applicant must have a Licensed Physician or a Licensed Clinical Psychologist evaluate the alleged incompetent and complete the form. At time of initial filing
Date of evaluation must have been within 3 months of filing of the application.

Notice to Prospective Ward of Application and Hearing
Complete form At time of initial filing
Make certain that correct **daytime address** of the proposed ward is provided. Eg. school, workshop, hospital, etc.
The Court will fill in hearing date & time and sign & date form.

Notice of Hearing for Appointment of Guardian of Alleged Incompetent
List next of kin of alleged incompetent who have not waived notice (form 15.1) At time of initial filing if not obtaining waivers.
Complete certified mail on each person listed The clerk will return the form to the applicant.
Complete affidavit on *back* of form. The applicant will serve a copy of the form by certified mail on the next of kin. The original form will be presented to the Judge on day of hearing.
Present certified mail return (green card) from each individual who did not waive notice to the Judge

Investigator's Report (17.8)
Complete the top portion of the form.
The Court Investigator will complete the form after evaluating the alleged incompetent

THE NEXT GROUP OF FORMS IS NOT NEEDED AT THE INITIAL FILING.

Guardian's Bond (15.3)
For Guardianship of the Estate of a proposed ward, the applicant is required to execute a bond. May be left with the court anytime prior to the hearing.
Applicant must execute and date form.
Bond must be processed by a surety company
The bond amount is normally twice the value of the proposed ward's personal property.

<p>Oath of Guardian (15.9) Complete form, but do not sign. Oath must be executed in front of the Judge.</p>	<p>Preferably at the time of initial filing, if not, day of hearing.</p>
<p>Letters of Guardianship (15.4) Complete form The Court Clerk will sign and date, If guardianship is granted</p>	<p>Preferably at the time of initial filing, if not, day of hearing.</p>
<p>Judgment Entry – Appointment of Guardian for Incompetent Person Complete form The court will execute if the guardianship is granted</p>	<p>Preferably at the time of initial filing, if not, day of hearing.</p>
<p>Guardian’s Inventory (15.5) If the guardianship is for the Estate or Person & Estate, the guardian must file an Inventory specifically listing the assets of the incompetent and the value of those assets</p>	<p>3 months from date of appointment</p>
<p>Application and Order Authorizing Release of Funds (15.6) To obtain the right for the guardian to release funds, complete form. Specifically, list the name of the financial institution, the type of account and the account number.</p>	<p>Anytime after the appointment has been granted.</p>
<p>Application and Order Authorizing Expenditure of Funds (15.7) All expenditures made by the guardian have to be approved by the court if a Guardianship of the Estate is established. List who is to be paid, purpose of the expenditure, and amount of expenditure.</p>	<p>Anytime after the Guardian’s Inventory has been filed</p>
<p>Guardian’s Account (15.8) From the date of their appointment, the Guardian of the Estate is responsible for filing an annual account. Specifically list the assets of the ward that were listed on the Inventory (15.5) plus all income and disbursements.</p>	<p>Every year from date of appointment</p>
<p>Bank Certificates (15.81) Have an employee of each bank where the Guardianship funds are deposited complete the form. Guardian must sign Attach this form (15.81) to the Guardian’s Account (15.8)</p>	

Entry Setting Hearing on Account

Fill in name of ward only, the Court will fill in hearing date & time & date the form

Notice of Hearing on Account

When filing a *final* account, the guardian shall serve certified mail notice on all of the ward's next of kin, unless waivers are obtained

Waiver of Notice of Hearing on Account

If possible, have all next of kin execute form

Entry Approving and Settling Account

Complete form
Present to Clerk for further processing

Guardian's Report

Guardian must complete form
Make sure to complete the *front* and *back* of the form and to sign in the appropriate area.

Every two (2) years
from date of appointment

Statement of Expert Evaluation (In Support of Guardian's Report)

Guardian must have a Licensed Physician, Psychologist, Clinical Social Worker *or* Mental Retardation Team evaluate the ward and complete the form.

The evaluation must be within three months of the date of this report.

This Evaluation must be filed together with the Guardian's Report.

Filed with the
Guardian's Report

STEP 2: ASSIGNING OF JUDGE, REVIEWING OF FORMS AND SETTING HEARING DATE

When all forms have been completed, present them to the Clerk at the information desk on the 3rd Floor of the Courthouse. All forms are then taken to the Judge for review and setting of hearing. If you are unable to obtain waivers from the next of kin in Ohio, the hearing date may be continued for the certified mail service to be completed.

STEP 3: FILING OF FORMS WITH CLERK

All forms are taken to the Clerk who will assign a case number. At this time, the Clerk will require the payment of the filing fee.

STEP 4: SERVICE OF NOTICE ON ALLEGED INCOMPETENT

The Notice to Prospective Ward will be served by the court investigator at least eight (8) days prior to the hearing date.

Please make sure you let the Court know the **daytime address** of the alleged incompetent so proper service can be made on him or her.

After the investigator completes service, he will complete an Investigator's Report regarding the alleged incompetent. The notice and investigator's report will be docketed and placed in the file folder for the Judge to review.

STEP 5: REQUIRED EDUCATION FOR GUARDIANS

All guardians appointed after June 1, 2015 are required to take a one- time six-hour course on the fundamentals of adult guardianship. (See letter regarding course)

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

**APPLICATION FOR APPOINTMENT OF GUARDIAN
OF ALLEGED INCOMPETENT**

(R.C. 2111.03)

Applicant represents to the Court that _____ aged _____ years,
resides or has a legal settlement at _____, in
_____ County, Ohio and that the prospective ward is incompetent by reason of [R.C.2111.01(D)]

A Statement of Expert Evaluation is attached. (Form 17.1)

A list of Next of Kin of Proposed Ward is also attached. (Form 15.0)

The whole estate of said prospective ward is estimated as follows:

Personal property \$ _____

Real estate \$ _____

Annual rents \$ _____

Other annual income \$ _____

Applicant represents that the applicant is not an administrator, executor or other fiduciary of the estate wherein the alleged incompetent is interested.

Applicant offers the attached bond in the amount of \$ _____

Applicant further represents that a guardian of the alleged incompetent is necessary in order that
 the ward ward's property may be taken proper care of and asks that a guardian be
appointed.

THE TYPE OF GUARDIANSHIP APPLIED FOR IS [check the applicable boxes]

non-limited limited person and estate estate only person only

If limited guardianship is applied for, the limited powers requested are _____

The time period requested is

indefinite definite to _____

Applicant's relationship to alleged incompetent is _____

CASE NO. _____

The Applicant 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.)

Attorney for Applicant

Type or print name

Address

City State Zip

Phone number (include area code)

Supreme Court Registration Number

Applicant

Type or print name

Age Social Security Number

Street

City State Zip

Phone number (include area code)

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

NEXT OF KIN OF PROPOSED WARD

[R.C. 2111.04]

(NOTE: Specify age and birthdate of each minor under 16 on the line containing the minor's name. List the name and address of the minor's parent, guardian or custodian on the name and address lines following the minor's address.)

Service Waived		Relationship	Birthdate Of Minor
1. <input type="checkbox"/>	Name _____	_____	_____
	Address _____		Zip _____
2. <input type="checkbox"/>	Name _____	_____	_____
	Address _____		Zip _____
3. <input type="checkbox"/>	Name _____	_____	_____
	Address _____		Zip _____
4. <input type="checkbox"/>	Name _____	_____	_____
	Address _____		Zip _____
5. <input type="checkbox"/>	Name _____	_____	_____
	Address _____		Zip _____
6. <input type="checkbox"/>	Name _____	_____	_____
	Address _____		Zip _____
7. <input type="checkbox"/>	Name _____	_____	_____
	Address _____		Zip _____
8. <input type="checkbox"/>	Name _____	_____	_____
	Address _____		Zip _____
9. <input type="checkbox"/>	Name _____	_____	_____
	Address _____		Zip _____
10. <input type="checkbox"/>	Name _____	_____	_____
	Address _____		Zip _____

Date

Applicant

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

**JUDGMENT ENTRY
SETTING HEARING ON APPLICATION FOR APPOINTMENT
OF GUARDIAN**

This day _____ appeared in open Court, and filed an application for the appointment of (limited) guardian of the (person and estate) of _____ It is ordered that the _____ day of _____, _____ at _____ o'clock ____M., be and is hereby fixed as the time of hearing said application before this Court. It is further ordered that written notice be served personally upon minors over fourteen years of age and in the manner as is provided by law upon all others entitled to receive the same.

Date

Probate Judge

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP _____

CASE NO. _____

WAIVER OF NOTICE

We, the undersigned, do each of us hereby waive the issuing and service of notice, voluntarily enter our appearance herein.

We do hereby consent to the appointment of _____
or some suitable person as guardian of _____

PROBATE COURT OF _____ COUNTY, OHIO

GUARDIANSHIP OF _____

CASE NO. _____

**FIDUCIARY'S ACCEPTANCE
GUARDIAN
(R.C. 2111.14)**

I, the undersigned, hereby accept the duties which are required of me by law, and such additional duties as are ordered by the Court having jurisdiction.

AS GUARDIAN OF THE ESTATE, I WILL:

1. Make and file an inventory of the real and personal estate of the ward within 3 months after my appointment.
2. Deposit funds which come into my hands in a lawful depository located within this state.
3. Invest surplus funds in a lawful manner.
4. Make and file an account biennially, or as directed by the Court.
5. File a final account within 30 days after the guardianship is terminated.
6. Inventory any safe deposit box of the ward.
7. Preserve any and all Wills of the ward as directed by the Court.
8. Expend funds only upon written approval of the Court.
9. Make and file a guardian's report biennially, or as directed by the Court.

AS GUARDIAN OF THE PERSON, I WILL:

1. Protect and control the person of my ward, and make all decisions for the ward based upon the best interest of the ward.
2. Provide suitable maintenance for my ward when necessary.
3. Provide such maintenance and education for my ward as the amount of his estate justifies if the ward is a minor and has no father or mother, or has a father or mother who fails to maintain or educate him/her.
4. Make and file a guardian's report biennially, or as directed by the Court.
5. Obey all orders and judgments of the Court pertaining to the guardianship.
6. Obtain the written approval of the Court before executing a caretaker power of attorney authorized by R.C. 3109.52.

If I change my address or the ward's address, I shall immediately notify Probate Court in writing.
I acknowledge that I am subject to removal as such fiduciary if I fail to perform such duties. I also acknowledge that I am subject to possible penalties for improper conversion of the property which I hold as such fiduciary.

Date

Fiduciary

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

GUARDIAN'S BOND
(R.C. 2109.04(A)(1))

Amount of this bond \$ _____

The undersigned principal, and sureties if any, are obligated to the State of Ohio in the above amount, for payment of which we bind ourselves and our successors, heirs, executors, and administrators, jointly and severally.

The principal has accepted in writing the duties of fiduciary in ward's estate, including those imposed by law and such additional duties as may be required by the Court.

This obligation is void if the principal performs such duties as required.

This obligation remains in force if the principal fails to perform such duties, or performs them tardily, negligently, or improperly, or if the principal misuses or misappropriates estate assets or improperly converts them to his own use or the use of another.

[Check if personal sureties are involved.] The sureties certify that each of them owns real estate in this county, with a reasonable net value as stated below.

Date

Principal

Surety

Surety

by _____
Attorney in Fact

by _____
Attorney in Fact

Typed or Printed Name

Typed or Printed Name

Address

Address

Net value of real estate owned in this county

Net value of real estate owned in this county

\$ _____

\$ _____

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

OATH OF GUARDIAN

(R.C. 2111.02(C))

(To be taken on Appointment of Guardian)

I, _____, Guardian
of _____, will faithfully and completely fulfill my duties as
Guardian, including the duty:

- To file, and continue to make diligent efforts to file, a true inventory in accordance with the Ohio Revised Code, and report all assets belonging to the estate of my ward.
- To file timely and accurate reports.
- To file timely and accurate accounts.
- To, at all times, protect my ward's interests and to make all decisions based on the best interest of my ward.
- To apply to the Court for authority to expend funds prior to so doing.
- To obey all orders and rules of this Court pertaining to guardianships.

Guardian

The above oath was taken and signed in my presence on this _____
day of _____, _____.

Judge/Magistrate

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

STATEMENT OF EXPERT EVALUATION

Definition of incompetent [O.R.C. 2111.01 (D)]: "Incompetent means any person who is so mentally impaired as a result of a mental or physical illness or disability, or mental retardation, or as a result of chronic substance abuse, that the person is incapable of taking proper care of the person's self or property or fails to provide for the person's family or other persons for whom the person is charged by law to provide , or any person confined to a correctional institution within this State."

The Statement of Evaluation does not declare the prospective ward competent or incompetent, but is evidence to be considered by the Court.

The fee for completing this evaluation **WILL NOT** be paid by the Court. Each evaluator should secure payment from the Applicant.

- 1. This Statement of Evaluation is for:
 Guardianship Application. (To be completed by a Licensed Physician, or Licensed Clinical Psychologist, and attached to the Application).
 Guardian's Report. (Evaluation and Statement by a Licensed Physician, Licensed Clinical Psychologist, Licensed Social Worker, or Mental Retardation Team to be completed within three months of date of the report. R.C. 2111.49(A)(1)(i).)

- 2. Statement completed by: (please type or print)

Name: _____

Address: _____ Phone _____

Who is a:

Licensed Physician

Licensed Clinical Psychologist

Licensed Social Worker

Mental Retardation Team

- 3. Following is my diagnosis/assessment of the mental and physical capacity, and the functioning level of the prospective ward.

CASE NO. _____

4. Is the prospective ward mentally impaired? Yes _____ No _____

5. A. Is there observed or reported evidence of mental impairment?
Yes _____ No _____ Describe: _____

B. If reported, name source: _____

6. If the prospective ward is mentally impaired, what is the cause? _____

7. A. Is there observed or reported evidence of physical impairment?
Yes _____ No _____ Describe: _____

B. If reported, name source: _____

8. Can the prospective ward conduct business affairs without the aid of a guardian?
Yes _____ No _____ Comments: _____

9. Can the prospective ward properly care for himself without the aid of a guardian?
Yes _____ No _____ Comments: _____

10. (TO BE COMPLETED IF SUBMITTED WITH A GUARDIAN'S REPORT) In my opinion, the guardianship should be: Continued _____ Terminated _____

11. (TO BE COMPLETED IF SUBMITTED WITH AN APPLICATION FOR GUARDIANSHIP) In my opinion, the application for guardianship: Should be granted _____ Should not be granted _____

ADDITIONAL COMMENTS

I certify that I have evaluated _____ for the purpose of guardianship.

Date of Evaluation _____

Evaluator

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

**NOTICE TO PROSPECTIVE WARD OF APPLICATION
AND HEARING**

To _____

Address _____

An application for appointment of _____ as
(limited) guardian for your (person and estate) has been filed with the Probate Court.

A hearing on that application will be held on _____
_____, at _____ o'clock ____ M. _____

_____. At that hearing, Applicant
must prove by clear and convincing evidence that, because of mental impairment, you are unable to
handle your own affairs.

1. You have the right be present at the hearing to contest the application, and to be represented by an attorney of your choice;
2. The right to have a friend or family member of your choice present at the hearing;
3. The right to have evidence of an independent expert evaluation introduced at the hearing;
4. If you are indigent, upon your request, an attorney and an independent expert evaluator will be appointed at court expense;
5. If you are indigent, and you appeal the guardianship decision, you have the right to have an attorney appointed and necessary transcripts prepared at court expense.

Witness my signature and the seal of the Court,

this _____ day of _____,

(Seal)

Probate Judge
by _____
Deputy Clerk

CASE NO. _____

RETURN

_____ County, Ohio

Received this notice on the _____ day of _____,
and on the _____ day of _____, I served
the same by delivering a true copy thereof personally to _____

I communicated with him/her in a language or method of communication understandable to the
alleged incompetent.

Investigator

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

**NOTICE OF HEARING FOR APPOINTMENT
OF GUARDIAN OF ALLEGED INCOMPETENT PERSON**

To Spouse and Known Next of Kin
(R. C. 2111.04)

To _____

Address _____

To _____

Address _____

To _____

Address _____

next of kin of _____, known to reside in this state.

You are hereby notified that on the _____ day of _____,

_____ filed in the
Court an application for the appointment of a (limited) guardian of the (person and estate) of _____

_____ an alleged incompetent.

A hearing on that application will be held on _____

_____ at _____ o'clock ____ M. at _____

Witness my signature and the seal of the Court,
this _____ day of _____

(Seal)

Probate Judge

Deputy Clerk

RETURN

CASE NO. _____

_____ County, Ohio

Received this writ on the _____ day of _____ at _____ o'clock _____ M., and on the _____ day of _____, _____ I served the same by (Insert, "delivering", "leaving" or "sending") _____

_____ a true copy thereof (Insert, "personally to", "at the usual place of residence", or "by certified mail to the last known address of")

FEES	
Service and return, 1st name, \$	_____
_____ Additional names, at	_____
_____ Miles traveled, at	_____
_____	_____
_____	_____
Total, \$	_____

Sheriff

Deputy

AFFIDAVIT OF SERVICE

The State of Ohio, _____ County.

_____, being first duly sworn, says that on the _____ day of _____, he served the within notice by delivering a true copy thereof personally to _____

Sworn to before me and signed in my presence, this _____ day of _____

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

INVESTIGATOR'S REPORT

(R.C. 2111.041)

GENERAL INFORMATION

[To be completed by counsel/applicant]

Prospective ward's age _____ Residence _____

Relationship to applicant _____

If guardianship is limited, include specific duties requested: _____

Grounds for application (R.C. 2111.01 (D)) _____

Documentation submitted and date of evaluation _____

INVESTIGATOR'S REPORT

[To be completed by Probate Court Investigator]

Service of notice made in hospital, nursing facility, or community based care facility:

Name of Facility _____

Address of Facility _____

Administrator or representative served _____

Prospective ward's understanding of the concept of guardianship:

_____ Good _____ Fair _____ Poor _____ Unable to Determine

Prospective ward's attitude of the concept of guardianship was:

_____ Consenting _____ Opposed _____ Unable to Determine

Specific requests of prospective ward concerning enumerated rights: _____

Others present during contact: _____

CASE NO. _____

Describe the extent to which the prospective ward's rights were communicated and the method and language used. _____

MENTAL AND PHYSICAL CONDITION OF PROSPECTIVE WARD

Observed or reported evidence of mental and/or physical impairments affecting prospective ward's ability to properly care for himself.

a) mental _____

b) physical _____

RECOMMENDATIONS

Is there a necessity for guardianship?

Yes _____ No _____ Describe: _____

Is there evidence that a less restrictive alternative is needed?

Yes _____ No _____ Describe: _____

Necessity for appointment of:

Attorney _____ Independent Expert Evaluator _____

Special urgency needs (describe) _____

Remarks _____

_____ Date

_____ Investigator

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

LETTERS OF GUARDIANSHIP
(R.C. 2111.02)

_____ is appointed Guardian of
_____, an _____ Incompetent _____ Minor.

Guardian's powers are:

All powers conferred by the laws of Ohio and rules of this Court over the ward's:

_____ Person and Estate _____ Person Only _____ Estate Only

Limited to _____

Those guardianship powers, until revoked, are for an:

_____ Indefinite time period

_____ Definite time period to _____

The above-named Guardian has the power conferred by law to do and perform all the duties of Guardian as described. No expenditures shall be made without prior Court authorization.

Date

Probate Judge

NOTICE TO FINANCIAL INSTITUTIONS
Funds being held in the name of the within-named Ward shall not be released to Guardian without a Court order directing release of a specific fund and amounts thereof.

CERTIFICATE OF APPOINTMENT AND INCUMBENCY

The above document is a true copy 'of the original kept by me as custodian of this Court. It constitutes the appointment and letters of authority of the named guardian, who is qualified and acting in such capacity.

(Seal)

Probate Judge

by _____
Deputy Clerk

Date

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

JUDGMENT ENTRY
APPOINTMENT OF GUARDIAN FOR INCOMPETENT PERSON
(R.C. 2111.02)

Upon hearing the application for appointment of guardian herein the Court finds that _____
is incompetent by reason of _____
_____ and therefore is incapable of taking
proper care of _____ self and _____ property, and that a guardianship is necessary.

The Court further finds that all persons who were entitled to notice of the hearing thereon
were given or waived notice thereof; that the incompetent is a resident of this county or has
legal settlement herein; and that this Court has jurisdiction.

It is therefore ordered that a (limited) guardian of the (person and estate) be appointed.

The Court therefore appoints _____
a suitable and competent person, (limited) guardian of the (person and estate) of _____
_____, _____ incompetent,
with the powers conferred as described, and limited to those powers contained in the Letters
of Guardianship issued by this Court. This appointment is in compliance with R.C. 2111.09.

The Court approves the bond as filed.

The Court finds a record of the hearing was waived.

The Court orders Letters of Guardianship issue to _____
as provided by law.

Date

(SEAL)

Probate Judge

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

GUARDIAN'S INVENTORY

(R.C. 2111.14(A))

of the real and personal estate of the ward ___ with its
value and the value of the yearly rent of the estate

List any safety deposit box and date and location of any will.

\$

RECAPITULATION

Total value of Personal Estate

\$ _____

Total value of Real Estate

\$ _____

Yearly rent of Real Estate

\$ _____

Other annual income

\$ _____

Total

\$ _____

Guardian

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

APPLICATION TO RELEASE FUNDS TO GUARDIAN

Now comes the guardian of the above named ward and makes application for authority to secure the release of the following funds of the ward.

The applicant further states that it is for the best interest of the ward that this authority be granted.

Guardian

ORDER AUTHORIZING RELEASE OF FUNDS

This _____ day of _____, 20____, this cause came on to be heard upon the application of the guardian of the above named ward and the evidence, and the Court being fully advised in the premises, hereby authorizes the release of the above funds to the guardian.

Judge

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

APPLICATION FOR AUTHORITY TO EXPEND FUNDS

Now comes the undersigned, guardian of the estate of the above named minor incompetent ward, and makes application for authority to expend funds for the best interest of the ward as follows:
[State amount requested, nature of expenditure, and the frequency and duration of authority requested. Attach additional explanation, documentation, or estimates as needed.]

Guardian

ORDER AUTHORIZING EXPENDITURE OF FUNDS

This _____ day of _____, 20____, this cause came on to be heard upon the application of the guardian of the above-named ward and the evidence, and the Court being fully advised in the premises, hereby authorizes the guardian to expend funds as set forth in the Application.

Judge

PROBATE COURT OF _____ COUNTY, OHIO

CASE NO. _____

RECAPITULATION

Total Receipts _____	\$ _____
Total Disbursements _____	\$ _____
Balance Remaining _____	\$ _____

ITEMIZED STATEMENT OF ALL FUNDS, ASSETS AND INVESTMENTS

Item _____	\$ _____
------------	----------

Attorney for Guardian

Attorney Registration No.

Guardian

Typed or Printed Name

Address

ENTRY SETTING HEARING

The Court sets _____ at _____ o'clock ____ M. as the date and time for hearing the above account.

Date

Judge

PROBATE COURT OF _____ COUNTY, OHIO

IN THE MATTER OF THE GUARDIANSHIP OF _____

CASE NO. _____

BANK CERTIFICATE

N.B. Must be executed when funds are on deposit.

I HEREBY CERTIFY that the within named fiduciary, on the date named below, had on deposit in

The _____ of _____, Ohio,

the sum of \$ _____ on _____ to the credit of

Nature of deposit

the estate of _____

Bank

Dated _____, _____

By _____
Cashier

Fiduciary

BANK CERTIFICATE

N.B. Must be executed when funds are on deposit.

I HEREBY CERTIFY that the within named fiduciary, on the date named below, had on deposit in

The _____ of _____, Ohio,

the sum of \$ _____ on _____ to the credit of

Nature of deposit

the estate of _____

Bank

Dated _____, _____

By _____
Cashier

Fiduciary

Attach to Guardian account form 15.8

PROBATE COURT OF _____ COUNTY, OHIO

ESTATE OF _____, DECEASED

CASE NO. _____

NOTICE OF HEARING ON ACCOUNT

[R.C. 2109.33]

To:

You are hereby notified that a _____ account covering the period from _____ to _____ has been filed, and the hearing will be held on _____ at _____ o'clock ____ M.

The Court is located at _____

You are required to examine the account, to inquire into the contents of the account, and into all matters that may come before the Court at the hearing on the account. Any exceptions to the account shall be filed in writing not less than five days prior to the hearing. Absent the filing of written exceptions, the account may be approved without further notice.

Fiduciary/Attorney for Fiduciary

Attorney Registration No. _____

PROBATE COURT OF _____ COUNTY, OHIO

ESTATE OF _____, DECEASED

CASE NO. _____

WAIVER OF NOTICE OF HEARING ON ACCOUNT

[R.C. 2109.33]

The undersigned, who are interested in the estate, waive notice of the hearing on the account.

IN THE COURT OF COMMON PLEAS OF MONROE COUNTY, OHIO
PROBATE AND JUVENILE DIVISION

IN THE MATTER OF THE GUARDIANSHIP OF: _____

CASE NO. _____

ENTRY SETTING HEARING ON ACCOUNT

The Court sets _____ at _____ o'clock ____ M as the date and time for hearing on the current/final account in this matter. If notice is required, the Court orders that notice of the hearing on the account be given to all parties entitled to notice, who do not waive the same, at least fifteen (15) days prior to the date and time set for hearing.

Date

James W. Peters, Judge

Attorney

Attorney Registration No. _____

PROBATE COURT OF _____ COUNTY, OHIO

TRUST OF
GUARDIANSHIP OF
ESTATE OF _____

CASE NO. _____

ENTRY APPROVING AND SETTLING ACCOUNT

Upon hearing the account filed on _____, the Court finds that:

[Check whichever of the following are applicable]

- The _____ partial account has been lawfully administered;
- The estate has been lawfully administered except for final distribution to the beneficiaries;
- The estate has been fully and lawfully administered and the assets have been distributed in accordance with the law or the applicable instruments governing distribution;
- The events have occurred after which the Court may approve and settle a final account.

The account is therefore approved and settled.

[Check if applicable] The fiduciary and surety are discharged.

Date

Probate Judge

[Check whichever of the following are applicable]

- This is the _____ current account.
- This is a final account of a (deceased) (removed) (resigned) fiduciary. The estate shall remain open.
- This is a final account of the guardianship for the estate only. This matter shall continue as a person only guardianship.
- This is a final account of a beneficiary of a trust. The trust estate shall remain open for other beneficiaries of the trust.

July 1, 2015

Dear Ohio Guardian:

On March 10, 2015, the Supreme Court of Ohio announced the adoption of Rules of Superintendence for the Courts of Ohio 66.01 – 66.09. The new rules, recommended by the Advisory Committee on Children and Families of the Supreme Court, will govern adult guardianships in Ohio. The rules will take effect June 1, 2015 and will make positive changes to Ohio's adult guardianship practice.

The rules seek to standardize guardianship practices throughout Ohio by establishing clear minimum standards and responsibilities for probate court and guardians. The new rules cover a wide breadth of topics, including person-center planning, guardian compensation, and complaint process, amongst other critical topics to ensure the best interest of persons under guardianship. Because knowledgeable and educated guardians are a cornerstone of Ohio's adult guardianship system, the new rules also set forth specific education requirements intended to ensure guardians have a clear understanding of a guardian's ongoing duties and responsibilities to the court and Ohio's adult wards.

Pursuant to Superintendence Rule 66.06, as of June 1, 2015, court-appointed guardians will be required to take a one-time six-hour course on the fundamentals of adult guardianship. The Rule distinguishes between new guardianship appointments (made after June 1, 2015) and individuals serving as guardians as of June 1, 2015.

- Guardians appointed after June 1, 2015, with no experience as a guardian within the five previous years, will have six months from the date of the appointment to complete the fundamentals course.
- Guardians serving on June 1, 2015, or individuals who have served as a guardian during the five previous years, will have until June 1, 2016, to complete the fundamentals course.

Additionally, Superintendence Rule 66.07 delineates requirements for a three-hour continuing education course every calendar year after completing the initial fundamentals

course. The rule also directs guardians to inform, and document compliance with the education requirements to the court in which they practice. Guardians who do not complete the education requirements will be ineligible for new adult guardianship appointments. See the Notice of Compliance attached which must be completed and filed with the Court.

To assist guardians in meeting the education requirements and gain full understanding about the expectation laid-out in the rules, the Supreme Court of Ohio Judicial College is offering the six-hour fundamentals course in three forms. Refer to the enclosed flyer and registration form to attend a regional live course, broadcast version of the course, or online self-study course. Three-hour continuing education course will be available beginning in the first quarter of 2016. The live courses will be provided free of charge, delivered regionally and monthly. Current information on course dates, locations, and registration can be found at the following link:

<http://www.supremecourt.ohio.gov/Boards/judCollege/adultGuardianship/default.asp>.

Continuing education credits (CLE) will be requested for each course developed by the Judicial College. Adult guardianship education may also be provided by another entity, with approval from your local courts.

In addition to the education requirements, Superintendence Rule 66.05 requires the courts to conduct, or cause to be conducted, a criminal background check on each applicant to serve as a guardian of an adult ward. Probate courts may accept certificates of good standing with disciplinary information issued by the Supreme Court from attorneys in lieu of the background check.

These new rules promote uniformity, consistency, and positive change to Ohio's probate courts. We recognize the important role Ohio's adult guardians play in ensuring the safety and well-being of people under guardianship, and we look forward to working with you in the future.

Sincerely,

Judge James W. Peters

JWP/mes
Encl.

PROBATE COURT OF _____ COUNTY, OHIO

GUARDIANSHIP OF: _____

CASE NO.: _____

**NOTIFICATION OF COMPLIANCE WITH
GUARDIAN EDUCATION REQUIREMENTS
[Sup.R. 66.06, Sup.R. 66.07]**

The undersigned, currently serves as the Guardian of the above-named Ward, and hereby reports to the Court that I have successfully completed:

- the guardian fundamentals course pursuant to Sup.R. 66.06; or
- the continuing education course pursuant to Sup.R. 66.07

Title of Course: _____

Date Attended: _____

Location of Course: _____

Education Provided by: _____

[Attach certificate of completion if applicable.]

Print Name

Signature

Address

Phone Number

City, State