

# AFFIDAVIT OF GUARDIANSHIP

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, of legal age, resident of \_\_\_\_\_, after  
being sworn in accordance with law, do hereby depose and state:

1. That I am the (relationship) of the minor(s) named below:
  - Name of minor:
  - Date of Birth:
2. That I have physical and legal custody of the above-mentioned minor(s) and act as their guardian.
3. That the biological parent(s) of the child(ren) is/are:  
.....
4. That I am filing this affidavit for the purpose of:  
.....
5. That I am making this statement truthfully, of my own free will, and for whatever legal purposes it may serve.

Date: \_\_\_\_\_ Place: \_\_\_\_\_

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Signature of Affiant

(Print Name)

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Witness

(if required)

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**SUBSCRIBED AND SWORN TO** before me this \_\_\_\_\_ day  
of \_\_\_\_\_, 20 \_\_\_\_.

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Notary Public

My Commission Expires: \_\_\_\_\_