

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: _____

Signature of Affiant

(Print Name)

Witness

(if required)

SUBSCRIBED AND SWORN TO before me this _____ day
of _____, 20____.

Notary Public

My Commission Expires: _____