

**IN THE PROBATE COURT
COUNTY OF PIKE
STATE OF GEORGIA**

IN RE: _____) **FILE NO.: 20**____-GM-_____
_____,)
_____) **Minor.** _____)

PETITION TO ADD A CO-TEMPORARY GUARDIAN OF MINOR
(existing Temporary Guardianship)

The Petition of _____ who is domiciled at
[name of **current** temporary guardian, hereinafter "First Petitioner"]

_____ in
_____ County, State of _____ and

_____, who is domiciled at
[name of **proposed co-temporary guardian**, hereinafter "Second Petitioner"]

_____ in
_____ County, State of _____, proposed co-temporary
guardian of the above-named child.

1.

The child is currently located in _____ County, State of _____,
and his/ her current address is _____.

2.

The proposed co-temporary guardian has the following relationship with the child:

[how is the co-temporary guardian related to the child or how does he/she know the child]

3.

(initial the statement that is true)

_____ The petitioner(s) live in Henry County, Georgia **and** the child currently ***lives*** with the petitioner(s); OR

_____ The petitioner(s) live outside the State of Georgia but the child is currently found living in Henry County, Georgia;

OR

_____ Neither of the above statements are true in this case.

4.

The child's mother,

[mother's name]

(initial one below)

_____ Has selected proposed Co-Temporary Guardian to serve as co-temporary guardian by signing an acknowledgement and consent (see attached notarized acknowledgment and consent);

_____ Has not consented to the addition of the co-temporary guardian and her current physical address and county of residence is: _____,

_____ County;

_____ Has not consented to the creation of the temporary guardianship and her current address is unknown (see attached notarized affidavit of diligent search); OR

_____ Is deceased, and a copy of her death certificate is being filed with this Petition.

5.

The child's mother:

(circle appropriate phrase below)

(has) (has not) lost custody of the child when a Superior Court granted her former husband, the child's father, sole custody upon their divorce; OR

(has) (has not) had her parental rights to the child terminated by a Superior Court, Juvenile Court, or court other than a Probate Court;

6.

The child's father,

[father's name]

(initial one below)

_____ Has selected proposed Co-Temporary Guardian to serve as co-temporary guardian by signing an acknowledgement and consent (see attached notarized acknowledgment and consent);

_____ Has not consented to the addition of the co-temporary guardian and his current physical address and county of residence is: _____,
_____ County;

_____ Has not consented to the creation of the temporary guardianship and his current address is unknown (see attached notarized affidavit of diligent search); OR

_____ Is deceased, and a copy of his death certificate is being filed with this Petition.

7.

The minor's father:

(circle appropriate phrase below)

(is) (is not) listed on the child's birth certificate;

(was) (was not) married to the child's mother at any time before or after the child was born;

(has) (has not) lost custody of the child when a Superior Court granted his former wife, the child's mother, sole custody upon their divorce;

(has) (has not) formally legitimated the child before a Superior Court;

(is) (is not) currently in the process of legitimating the child before a Superior Court;

- (did) (did not) formally legitimate the child by signing with the child's mother a voluntary acknowledgement of paternity **before the child turned one year old** and filed it with the State Office of Vital Records; OR
- (has) (has not) had his parental rights to the child terminated by a Superior Court, Juvenile Court, or court other than a Probate Court;

8.

Co-Temporary Guardian needs to be added because: _____

9.

Additional Data: Include any important information this document failed to address. For example, if there has been any prior involvement with the Division of Family and Children Services ("DFCS"), please indicate below.

WHEREFORE, Petitioners pray:

1. Service be perfected as provided by law, if necessary; and
2. Second Petitioner be added as a co-temporary guardian of the minor named above.

Signature of First Petitioner /
Current Temporary Guardian

Signature of Second Petitioner /
Proposed Co-Temporary Guardian

(Printed
Name)

(Printed
Name)

(Address)

(Address)

(Address)

(Address)

(Telephone
Number)

(Telephone
Number)

(Email Address)

(Email Address)

Signature of Attorney

_____ (Printed
Name)

_____ (State Bar #)

_____ (Address)

_____ (Address)

_____ (Address)

_____ (Telephone
Number)

_____ (Email
Address)

VERIFICATION

STATE OF GEORGIA, PIKE COUNTY

Personally appeared before me the undersigned Petitioner(s) who on oath state(s) that the facts set forth in the foregoing petition (and the attached exhibits) are true.

Sworn to and subscribed before me,
this _____ of _____, 20____.

Signature of First Petitioner /
Current Temporary Guardian

Notary / Clerk of the Probate Court
My commission expires: _____

Printed Name of First Petitioner

Sworn to and subscribed before me,
this _____ of _____, 20____.

Signature of Second Petitioner /
Proposed Co-Temporary Guardian

Notary / Clerk of the Probate Court
My commission expires: _____

Printed Name of Second Petitioner

**ACKNOWLEDGEMENT AND CONSENT TO TEMPORARY GUARDIANSHIP
AND APPOINTMENT OF INDIVIDUAL(S) AS TEMPORARY GUARDIAN(S)**

IN RE: _____, **FILE NO.:** 20____-GM-____
[insert child's name]

I/We, _____, the mother and/or father
of the above-named, a minor, do hereby consent to the creation of a temporary guardianship and appointment
_____ as temporary guardians(s). I/We
also acknowledge service of the petition for appointment of a temporary guardian for said minor and waive any
and all further service and notice concerning said petition.

I/We further understand that pursuant to O.C.G.A. §29-2-8(b), upon application by a natural guardian (as
defined in said statute; see Instructions), the Court will remove the temporary guardian and dissolve the
temporary guardianship unless an objection is timely filed by the temporary guardian. If an objection is timely
filed to such an application, the juvenile court or the probate court shall determine, after notice and hearing,
whether a continuation or dissolution of the temporary guardianship is in the best interest of the minor. I/We
understand that nothing herein, including any optional assumption by the guardian of the obligation to support
the minor to the extent that no other sources of support are available, affects my legal obligation to support and
maintain said minor.

Sworn to and subscribed before me,
this _____ of _____, 20____.

Notary / Clerk of the Probate Court
My commission expires: _____

Signature of Mother

Printed Name of Mother

Address

Address

Telephone Number

Sworn to and subscribed before me,
this _____ of _____, 20____.

Notary / Clerk of the Probate Court
My commission expires: _____

Signature of Father

Printed Name of Father

Address

Address

Telephone Number

**IN THE PROBATE COURT OF PIKE COUNTY
STATE OF GEORGIA**

IN RE: _____) **FILE NO.: 20__-GM-__**
)
_____ (child),)
 Minor.)

ASSUMPTION OF OBLIGATION TO SUPPORT (OPTIONAL)

The undersigned, if appointed temporary guardian(s) of the above-named, a minor, assume(s) the obligation to support the minor while the guardianship is in effect to the extent that no other sources of support are available.

Sworn to and subscribed before me,
this ____ of _____, 20____.

Signature of First Petitioner

Notary / Clerk of the Probate Court
My commission expires: _____

Printed Name of First Petitioner

Sworn to and subscribed before me,
this ____ of _____, 20____.

Signature of Second Petitioner

Notary / Clerk of the Probate Court
My commission expires: _____

Printed Name of Second Petitioner

NON-CRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a Georgia only or a Georgia and Federal Bureau of Investigation (FBI) national fingerprint/biometric-based criminal history check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing. These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulation (CFR), 50.12, among other authorities.

- You must be provided written notification that your fingerprints/biometrics will be used to check the criminal history records maintained by the Georgia Crime Information Center (GCIC) and the FBI, when a federal record check is so authorized.
- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared or explained.
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your criminal history record (if you have such a record).
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on the information in the criminal history record.
- If agency policy permits, the officials may provide you with a copy of your criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may find information regarding how to obtain a copy of your Georgia criminal history record at the GBI website: <https://gbi.georgia.gov/services/obtaining-criminal-history-record-information-frequently-asked-questions> Information regarding how to obtain a copy of your FBI criminal history record is located at the FBI website: <https://www.edo.cjis.gov>
- If you decide to challenge the accuracy or completeness of your criminal history record, you should contact and send your challenge to the agency that contributed the questioned information. If the disputed arrest occurred in the State of Georgia, you may send your challenge directly to the GCIC. Contact information for the GCIC can be found at <https://gbi.georgia.gov/services/obtaining-criminal-history-record-information-frequently-asked-questions> Alternatively, you may send your challenge directly to the FBI by submitting a request via <https://www.edo.cjis.gov>. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenge entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for the authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.

Privacy Act Statement

This privacy act statement is located on the back of the FD-258 fingerprint card.

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI. Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket

Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

As of 02/04/2021

PRIVACY RIGHTS NOTIFICATIONS FORM

APPLICANT PRIVACY RIGHTS NOTIFICATION

(Applicant Notification and Record Challenge)

Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction or updating an FBI identification record is set forth in Title 28 Code of Federal Regulations 16.34.

Procedures for obtaining a copy of the FBI criminal history record are set forth in 28 CFR 16.30-16.33 or go to the FBI website at <http://fbi.gov/about-us/cjis/background-checks>.

By signing this document below, I hereby state that I have reviewed a copy of the Non-criminal Justice Applicant's Privacy Rights form and the Privacy Act Statement.

SOCIAL SECURITY NUMBERS NOTIFICATION

(Notice required under Section (7b) of the Federal Privacy Act of 1974)

Under Section 7(b) of the Privacy Act of 1974, 5 U.S.C. 552a (note), any government agency which requests an individual to disclose his Social Security account number must inform that individual whether the disclosure is mandatory or voluntary, by what statutory or other authority such number is solicited, and what uses will be made of it.

The Probate Judge of Pike County is authorized to request Social Security numbers pursuant to *Official Code of Georgia Annotated*, Section 16-11-129, which regulates firearms licensing checks and also under Rule 24.1, *Uniform Rules for the Probate Courts* in other situations as set forth therein including guardianships, conservatorships, and estates. The Social Security number blanks appear in certain forms published by the State of Georgia and by the local Court.

The Social Security number is used as a secondary identifier when processing checks of criminal history records maintained by the state and federal governments. In specific investigations which may involve examination of particular records obtained from outside sources, the Social Security number might be used to determine whether the individual named in the records and the individual under investigation are the same or different persons.

The listing of Social Security numbers on the disclosure forms is voluntary. Under Section 7(a) of the Privacy Act, it is not proper to deny or revoke a license or impose any penalty because of an individual's refusal to disclose a Social Security number.

However, the absence of a Social Security number as a secondary identifier may delay processing and decisions because of necessary additional investigative time. Note that the absence of a Social Security number may result in an individual initially being identified as having a criminal record which actually is that of another person.

This again, may result in delays in the decision.

I have reviewed the above privacy information regarding my privacy rights and social security number and I choose to:

- ☐ Provide my Social Security number
- ☐ Not provide my Social Security number

Sworn to and subscribed before me this _____
day of _____, 20____.

Notary Public / Probate Court Clerk

Print Name

Signature

PURPOSE CODE: E

CRIMINAL HISTORY CONSENT FORM
TEMPORARY GUARDIANSHIP

Probate Court:	Pike County Probate Court
Probate Court ORI:	GA114013J
Servicing Agency Name:	Pike County Sheriff's Department

Based on the submission of a Petition for Temporary Guardianship of a Minor, and being a resident in the home where the minor will be found over the age of 18, I hereby authorize the Probate Court of Pike County and the servicing agency above to conduct a background investigation and receive any criminal history information pertaining to me which may be in the files of any criminal justice agency as would be authorized by law.

Full Name (print)	
Other names used	
Current Address	
City, State, Zip	
Sex:	Race:
Date of Birth:	SSN (optional):

Signature of Proposed Guardian or Adult Residing in Home

Date

Sworn and subscribed to before me
this _____ day of _____, 20_____.

Signature of Notary or Probate Court Clerk

My commission expires _____