Petition filing fee: \$145.00

Service fees will vary depending on type of service required.

PETITION FOR TEMPORARY GUARDIANSHIP OF MINOR

You are not required to hire an attorney to file a Petition for Temporary Guardianship of Minor. However, please understand that it is legal in nature and may at times be complicated. As a service to the citizens of Pike County, Judge Blakeney created the following version of the petition to simplify the process. Before beginning, make sure you have, or are prepared to get, the following:

| The pe | etition must be typed or written in black or blue ink. | |
|---|---|--|
| she m | nust have proof the party applying to be the child's temporary guardian lives in Pike County (he or ay provide a copy of his or her driver's license, a state issued I.D., or a current power, gas, or bill showing the applicant's name and address). | |
| | nust have an official State-issued copy of the child's birth certificate (handwritten and hospital birth cates will not be accepted). | |
| | nust complete the "Minor Guardianship Information Sheet" and list each person living in the rary guardian('s)(s') home. | |
| You must submit consent forms signed by every person age 18 or older living in the temporary guardian('s)(s') home authorizing a Georgia Bureau of Investigation background check (last 4 pages in packet). | | |
| You must submit filing fees in the amount of \$145.00 payable to the Pike County Probate Court. | | |
| You must prove the child's parent(s) have knowledge of this proceeding (called "notice"). This can be done three ways: | | |
| | <u>If the parent(s) consent(s)</u> : The child's parent(s) may sign, and have notarized, an acknowledgement and consent to the petition which must be filed at the same time as the petition in the Court. Clerks of this Court can notarize documents if needed; | |
| | If you know the parent('s)(s') address(es): A sheriff's deputy can deliver a copy of the petition to the child's parent(s) at a cost of \$50.00 in addition to the \$145.00 filing fee or the mailman can attempt to deliver a copy of the petition to the child's parent(s) at a cost of \$15.00 in addition to the \$145.00 filing fee. | |
| | If you do not know where the child's parent(s) are: You must submit an Affidavit of Diligent Search. Based on the Affidavit, you will be allowed to publish notice of the petition on the child's parent(s) in the Pike Journal Reporter at a cost of \$60.00 payable to the Pike Journal Reporter (payment to the Pike Journal Reporter must be submitted to the Pike County Probate Court). | |
| | | |

If you do not understand how to complete the Petition for Temporary Guardianship of Minor, you may want to seek the professional legal advice of an attorney. Please be advised the clerks of this Court are legally prohibited from explaining to you how to complete this petition. Asking a clerk to tell you how to fill out the petition is asking her to commit a misdemeanor legal offense punishable by up to a year a jail and up to a \$1,000.00 fine.

Pike County Probate Court Minor Guardianship Information Sheet

| Case No. | |
|----------|---|
| | _ |

| Must be co | mpleted bef | ore meeting with Intake Clerk | | | |
|--|---------------|---------------------------------------|---|--|--|
| Complete Name of Minor: | | - | | | |
| Minor's Date of Birth: | | Minor's Current Age: | _ | | |
| Current school minor attends and current | nt grade: | | | | |
| Name of 1st Petitioner/Guardian: | | Name of 2 nd Petitioner/Gu | ardian: | | |
| Relationship to child: | | Relationship to child: | | | |
| Home Phone: | | Home Phone: | | | |
| Work/Cell Phone: | | _ Work/Cell Phone: | | | |
| Email address: | | | | | |
| Place of Employment: | | Place of Employment: | | | |
| Mother of Child: | | Father 0 | of Child: | | |
| Mother of Child: Mother's Current Address: | | | dinu. | | |
| Within 5 Current Madress. | | Father's Current Address: | | | |
| Mother's Current Phone Number: | | | | | |
| ☐Mother has signed consent to guardi | ianship | Father's Current Phone Nu | ımber: | | |
| Court use onlyType of service for: | | ☐ ☐ Father has signed conser | nt to guardianship | | |
| Mother: | | Is father named on Birth Certific | cate? | | |
| Father: | | Was father ever married to moth | Was father ever married to mother? ☐ Yes ☐ No | | |
| | | Has father legitimated child? | ☐ Yes ☐ No | | |
| Is DFCS involved with the mother or and contact information, etc | father of the | ling the County that is investigat | ing, the caseworker's name | | |
| | | | | | |
| Additional Information: | | | | | |
| List all other <i>children</i> in the home: | | | | | |
| Name | Age | Gender: M/F School Atten | ding: | | |
| Name | | | | | |
| Name | | | | | |
| Name | Age | Gender: M/F School Atten | ding: | | |
| List all <i>adults</i> living in the home: | | | | | |
| Name | Age | Gender: M/F Relationship | to Guardian | | |
| Name | | | | | |
| Name | | | | | |
| Name | Age | Gender: M/F Relationship | to Guardian | | |

| IN RE: | |) ESTATE NO.: | | | |
|--------------------------|-------------------------------------|--|--|--|--|
| | (child), |)) | | | |
| | Minor. |) | | | |
| PETITION F | OR TEMPORARY LET | TERS OF GUARDIANSHIP OF MINOR | | | |
| The petition of | [name of person asking to be | temporary guardian – called "petitioner(s)" in this document] | | | |
| who is/are domiciled at | | [address of petitioner(s)] | | | |
| | | [address of petitioner(s)] | | | |
| in | County, State of | shows: | | | |
| | | 1. | | | |
| The child, | [name of child] | is currently located in | | | |
| County, State of | | , and current address is: | | | |
| | | a with a date of birth of: | | | |
| A copy of the child's b | oirth certificate is attached | l hereto as exhibit "A." | | | |
| | | 2. | | | |
| The petitioner(s) has/ha | ave the following relationsh | ip with the child: | | | |
| fhow is/ar | re the petitioner(s) related to the | child or how do/does the petitioner(s) know the child] | | | |
| [110 W 15/ df | e the pennoner(s) related to the c | And of now do/does the peditoner(s) know the chird | | | |
| | | 3. | | | |
| (initial one below) | | | | | |
| | . , | County, Georgia and the child currently lives with the | | | |
| - | itioner(s); OR | | | | |
| | - | he State of Georgia but the child is currently found living in | | | |
| | e County, Georgia; OR | | | | |
| > Nei | ther of the above statement | s is true in this case. | | | |

| The child's | s mother. | ; |
|-----------------|---------------|---|
| (initial one be | | [mother's name] |
| (| | as selected petitioner(s) to serve as temporary guardian(s) by signing an acknowledgement |
| | | d consent (see attached notarized acknowledgment and consent); |
| | | is not consented to the creation of the temporary guardianship and her current physical |
| | | dress and county of residence is: |
| | | ,County; |
| | > Ha | as not consented to the creation of the temporary guardianship and her current address is |
| | un | known (see attached notarized affidavit of diligent search); OR |
| | > Is | deceased, and a copy of her death certificate is attached as exhibit "B." |
| | | 5. |
| The child' | 's mother: | |
| (circle appro | priate 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 | s father, | , |
| (initial one b | elow) | [father's name] |
| | | is selected petitioner(s) to serve as temporary guardian(s) by signing an acknowledgement |
| | and | d consent (see attached notarized acknowledgment and consent); |
| | > Ha | is not consented to the creation of the temporary guardianship and his current physical |
| | ade | dress and county of residence is: |
| | | , County; |
| | > Ha | is not consented to the creation of the temporary guardianship and his current address is |
| | | known (see attached notarized affidavit of diligent search); OR |
| | > Is | deceased, and a copy of his death certificate is attached as exhibit "B." |

The minor's father:

| (circle appr | opriate phrase | below) | | |
|--------------|----------------|---|--|--|
| (is) | (is not) | s 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. | | |
| The temp | oorary guardi | ianship is needed because | | |
| | | 9. | | |
| Additiona | al Data: Incl | ude any important information this document failed to address. For example, if this | | |
| petition i | s being filed | at the instruction of the Division of Family and Children Services ("DFCS"), please | | |
| indicate b | elow. | | | |
| | | | | |
| | | | | |

WHEREFORE, Petitioner(s) pray(s):

- 1. Service be perfected as provided by law, if necessary; and
- 2. Petitioner(s) be appointed temporary guardians(s) of the minor named above.

| Signature of First Petitioner | | Signature of Second Petitioner, if any | |
|-------------------------------|----------------------|--|--|
| | (Printed Name) | (Printed Name) | |
| | (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 |
| Notary / Clerk of the Probate Court My commission expires: | Printed Name of First Petitioner |
| Sworn to and subscribed before me, this of, 20 | G: |
| Notary / Clerk of the Probate Court My commission expires: | Printed Name of Second Petitioner |

| IN RE: ESTATE OF | |) | | |
|---|--|---|--|--|
| | MINOR, |) EST | ΓΑΤΕ NO | |
| | ACKNOWLEDGM | MENT OF MOT | THER | |
| Ι, | | | | , |
| [Full name of Mothe | er] First | Middle | | Last |
| Street | City | County | State | Zip Code |
| Mother of the above named and the appointment of [list Full Name of first Temporar | st all parties to whom | | - | |
| First | | Middle | | Last , |
| Full Name of second Tempor | ary Guardian: | | | |
| First | | Middle | | Last |
| and also acknowledge serve Minor and waive any and a I further understand by a natural guardian as Temporary Guardian(s) and by the appointed Temporatermination, the Juvenile whether a continuation or Minor. I understand that no fithe obligation to support affects my legal obligation. Sworn to and subscribed day of | all further service and that, pursuant to O.C defined in said statud dissolve the temporary Guardian(s). If Court or the Probate dissolution of the temporary higher the Minor to the extension to the extension of the text to support and maint before me this | I notice concernict. G.A. § 29-2-8(te [see instruction is ary guardianship an objection is Court shall detemporary guardianship any optional ing any optional | ng said Petitionsb), upon a petitionsl, the Counters an objectimely filed the termine, after anship is in the all Assumption of sources of sufficients and the sufficients are sufficients and the sufficients are sufficient as the sufficient and the sufficient and the sufficient and the sufficient as the sufficient and the suffici | on. tion for termination ort will remove the ection is timely filed o such petition for notice and hearing, best interest of the by the Guardian(s) |
| NOTARY/CLERK OF P | ROBATE COURT | Printed Name | e of Mother | |

| IN RE: ESTATE OF | |) | | |
|---|---|--|--|---|
| | MINOR, |) ESTATE NO | | |
| ACI | KNOWLEDG | GMENT OF FATHER | | |
| I, | | | | , |
| [Full name of Father] | First | Middle | | Last |
| Street | City | County | State | Zip Code |
| Father of the above named Mind and the appointment of [list all p | parties to whom | | - | |
| First | | Middle | | Last , |
| Full Name of second Temporary G | uardian: | | | |
| First | | Middle | | Last , |
| and also acknowledge service of Minor and waive any and all fur I further understand that, by a natural guardian as defined Temporary Guardian(s) and disserved by the appointed Temporary Guardian(s) and disserved termination, the Juvenile Court whether a continuation or dissol Minor. I understand that nothing of the obligation to support the Maffects my legal obligation to support to and subscribed before day of | ther service and pursuant to O.C ed in said statu- olve the tempor uardian(s). If or the Probate aution of the ten- g herein, inclu- Minor to the ex- pport and main | I notice concernict. G.A. § 29-2-8 (Inte [see instruction of the see instruction of the se | ng said Petitions), upon a petitions, the Couunless an objectimely filed the termine, after the highest in the lassumption of sources of survival and the survival and th | tion for termination art will remove the ection is timely filed to such petition for notice and hearing best interest of the by the Guardian(s) |
| NOTARY/CLERK OF PROBA My Commission Expires | ATE COURT | Printed Name | e of Father | |

| IN RE: ESTATE OF |) ESTATE NO |
|--|---|
| MINOR |) |
| ASSUMPTION OF OBLIGA | TION TO SUPPORT (OPTIONAL) |
| | an(s) of the above-named, a minor, assume(s) the obligation a effect to the extent that no other sources of support are |
| 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, thisof, 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 regardnesse to: | arding my privacy rights and social security number and I |
| □ Provide my Social Security number | |
| □ Not provide my Social Security number | |
| Sworn to and subscribed before me this | |
| day of, 20 | Print Name |
| Notary Public / Probate Court Clerk | |

Signature

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 Tempo resident in the home where the minor will be fou Probate Court of Pike County and the servicing a investigation and receive any criminal history in files of any criminal justice agency as would be a | and over the age of 18, I hereby authorize the agency above to conduct a background formation pertaining to me which may be in the |
| Full Name (print) | |
| Other names used | |
| Current Address | |
| City, State, Zip | |
| Sex: | Race: |
| Date of Birth: | SSN (optional): |
| Signature of Proposed Guardian or Adult Residin | ng in Home Date |
| Sworn and subscribed to before me this day of, 20 | |

Signature of Notary or Probate Court Clerk

My commission expires _____