INFORMATION AND INSTRUCTIONS DESIGNATION OF A STANDBY GUARDIAN OF A MINOR C.G.S. SECTIONS 45a-624 to 624q

- 1. A parent may use this form to designate a standby guardian of his or her child upon the occurrence of a specified contingency (for example, the parent's illness, death or absence from the country). If a child is being cared for by a court-appointed guardian rather than the child's parents, the court-appointed guardian may designate a standby guardian.
- 2. If both parents are alive, both must sign the designation of standby guardian (unless a court has removed the parent or terminated his or her parental rights).
- 3. A copy of the designation must be given to the designated standby guardian.
- 4. The standby guardianship becomes effective when the standby guardian signs a written statement that the specific contingency has occurred. A form for the statement is included in this material. The standby guardian has the authority and obligations of a guardian of the person of the minor as defined by C.G.S. section 45a-604 (5).
- 5. The authority of a standby guardian ceases when the specific contingency no longer exists or one year after the date the standby guardian becomes effective, whichever is earlier. If the standby guardian is effective at the time of the death of the parent, however, the authority of the standby guardian ceases 90 days after the death of the parent.
- 6. A parent may revoke a designation of the standby guardian at any time by written revocation and notice of the revocation to the standby guardian.
- 7. The form to designate a standby guardian and the written statement that the designation is in full force and effect are not filed in the Probate Court.
- 8. If the standby guardian needs to serve as a guardian beyond the expiration periods indicated in Paragraph 5 above, further action is required, such as a petition to the Probate Court for the district in which the minor child resides, is domiciled or is located concerning guardianship.

DESIGNATION OF A STANDBY GUARDIAN OF A MINOR C.G.S SECTIONS 45a-624 to 45a-624g

	of
(Name of Parent or Court–appointed G	
(City, State, Zip Code)	reby appoint, of (Name of Standby Guardian)
(Street Address)	,, as standby guardian o (City, State, Zip Code)
	James of Minor Children)
to take effect upon the occurrence of the f contingency or contingencies):	lowing contingency or contingencies (insert specific
This designation is made after careful refl	ction, while I am of sound mind.
Date:	
Signature of Parent	Signature of Witness
Type or Print Name of Parent	Type or Print Name of Witness
	Street Address of Witness
	City, State and Zip Code of Witness
	Signature of Witness
	Type or Print Name of Witness
	Street Address of Witness
	City, State and Zip Code of Witness

DESIGNATION OF A STANDBY GUARDIAN OF A MINOR C.G.S SECTIONS 45a-624 to 45a-624g

Date:	
Signature of Parent	Signature of Witness
Type or Print Name of Parent	Type or Print Name of Witness
	Street Address of Witness
	City, State and Zip Code of Witness
	Signature of Witness
	Type or Print Name of Witness
	Street Address of Witness
	City, State and Zip Code of Witness
If the designation is made by a court-appointe Date:	ed guardian, the guardian and witnesses must sign below
Signature of Guardian	Signature of Witness
Type or Print Name of Guardian	Type or Print Name of Witness
	Street Address of Witness
	City, State and Zip Code of Witness
	Signature of Witness
	Type or Print Name of Witness
	Street Address of Witness
	City, State and Zip Code of Witness

STATEMENT THAT DESIGNATION OF STANDBY GUARDIAN IS IN FULL FORCE AND EFFECT

STATE OF)	
COUNTY OF)	SS:
	-4
(Name of Standby Guardian)	of(Street Address)
,	e under penalty of false statement:
(City, State, Zip Code)	s under penalty of false statement.
THAT	,of(Street Address)
(Name of Parent or Standby Guar	dian) (Street Address)
	_, did on, 20 appoint me as standby
(City, State, Zip Code)	(Date of Designation)
guardian of	
guardian of((Names of Minor Children)
and to execute a statement that a specific	contingency had occurred.
THAT specified contingency was:	
THAT specified contingency has occurred	
IN WITNESS WHEREOF, I have hereunto	set my hand and seal under penalty of false statement.
	,
Date:	0
	Signature of Standby Guardian
Signature of Witness	Signature of Witness
Type or Print Name of Witness	Type or Print Name of Witness
Type of Fill Hame of Williams	Type of Fillertaine of Williams
Street Address of Witness	Street Address of Witness
City. State and Zip Code of Witness	City, State and Zip Code of Witness
City. State and Zip Code of Witness	City, State and Zip Code of Withess