

**Document #1: If you were presented this document to notarize, how would you complete it?
What type of notarization would you perform?**

Temporary Guardianship Agreement

I, Marie Mae Jones, of 9999 Sample Street
(print your full name) (street)
Bowie, Maryland 20721, as the custodial parent of:
(city, state, zip)

List the full names of each child	List each child's birth date
Jack C. Jones	01/25/9999
Gloria L. Jones	03/08/9999

Do hereby grant temporary guardianship of the above listed children to:

List the full names of the individual (s) to whom you are granting temporary custody	List each person's relationship to the child(ren)
Dolly McCowan	Aunt
James McCowan	uncle

Contact information of temporary guardians listed above:

Address: 9999 Sandy Drive, Silver Spring, Maryland 20909
Phone numbers: 240-555-9999, 240-444-9999

Statement of Consent: (To be signed in the presence of a legalized notary public.)

I, Marie Mae Jones, hereby grant temporary guardianship of the above children, whom
I have legal custody of to Dolly McCowan, James McCowan:

☒ From 9/1/9999 to 5/30/9999
(mm/dd/yyyy) (mm/dd/yyyy)

☐ For as long as necessary, beginning on N/A
(mm/dd/yyyy)

In addition, in the event of an emergency or non-emergency situation requiring medical treatment, I hereby grant permission for any and all medical and/or dental attention to be administered to my child/children, in the event of an accidental injury or illness. This permission includes, but is not limited to, the administration of first aid, and the use of an ambulance, and the administration of anesthesia and/or surgery, under the recommendation of qualified medical personnel. I also grant permission for the guardian(s) named above to make educational decisions for my child/children.

Signature: Marie Mae Jones Date: 8/23/9999

Signature: _____ Date: _____

Notarization:

On this _____ day of _____, _____, _____
(date) (month) (year) (name of parent)
personally appeared before me in _____, _____ and, in my presence,
(city) (state)
has/have satisfactorily identified him/her/themselves as the signer(s) of this Temporary Guardianship Form.

Name of Notary Official: _____

*Affix Notary
Seal Here*

Signature: _____ Commission Expires: _____

**Document #2: If you were presented this document to notarize, how would you complete it?
What type of notarization would you perform?**

Temporary Guardianship Agreement

I, Beverly Darden, of 9999 Sample Street
(print your full name) (street)
Baltimore City, Maryland, 21202, as the custodial parent of:
(city, state, zip)

List the full names of each child	List each child's birth date
Gloria Darden	02/02/9999
Charles Darden	11/06/9999

Do hereby grant temporary guardianship of the above listed children to:

List the full names of the individual (s) to whom you are granting temporary custody	List each person's relationship to the child(ren)
Janet Newell	Aunt
Thomas Newell	Uncle

Contact information of temporary guardians listed above:

Address: 9999 Poncho Drive, Upper Marlboro, MD 20774

Phone numbers: 240-222-9999, 240-888-9999

Statement of Consent: (To be signed in the presence of a legalized notary public.)

I, Beverly Darden, hereby grant temporary guardianship of the above children, whom
I have legal custody of to Janet Newell, Thomas Newell:

☐ From _____ to _____
(mm/dd/yyyy) (mm/dd/yyyy)

☒ For as long as necessary, beginning on 9/1/9999
(mm/dd/yyyy)

In addition, in the event of an emergency or non-emergency situation requiring medical treatment, I hereby grant permission for any and all medical and/or dental attention to be administered to my child/children, in the event of an accidental injury or illness. This permission includes, but is not limited to, the administration of first aid, and the use of an ambulance, and the administration of anesthesia and/or surgery, under the recommendation of qualified medical personnel. I also grant permission for the guardian(s) named above to make educational decisions for my child/children.

Signature: _____ Date: _____

Signature: _____ Date: _____

Notarization:

On this _____ day of _____, _____, _____
(date) (month) (year) (name of parent)
personally appeared before me in _____, _____ and, in my presence,
(city) (state)
has/have satisfactorily identified him/her/themselves as the signer(s) of this Temporary Guardianship Form.

Name of Notary Official: _____

*Affix Notary
Seal Here*

Signature: _____ Commission Expires: _____