

**GUARDIANSHIP INFORMATION SHEET**

\$177.00 to file **CASH or MONEY ORDER** (NO PERSONAL CHECKS, DEBIT/CREDIT CARDS WILL BE ACCEPTED, BUT THE COMPANY PROCESSING THE TRANSACTION WILL CHARGE A FEE). Make money order payable to *Madison County Clerk* for the Court Costs.

This packet is for Guardianship, and is for your use, acting as your own attorney. **THE CLERK DOES NOT PROVIDE LEGAL ADVICE; YOU WILL BE ACTING AS YOUR OWN ATTORNEY. IF YOU NEED LEGAL ADVICE, YOU MAY RESEARCH OR CONTACT AN ATTORNEY.**

This packet needs to be filled out and returned to our office. The instructions and letters will be provided by the Probate Clerk.

This entire packet will be submitted to the Judge and he/she will make the final decision. This process may take up to two (2) weeks. If a hearing is to be held, you will be notified by the Court of the date and time. Please provide all information, current address and phone number for all parties involved. The consents need to be signed by the biological parents; if no consents are signed, you will need to publish notice in a Madison County newspaper. The following are the costs for the newspapers most commonly used.

**ELWOOD CALL-LEADER/ALEXANDRIA TIMES-TRIBUNE**

Notice of Guardianship Hearing                      \$105.00

**ANDERSON HERALD BULLETIN**

Notice of Guardianship Hearing                      \$284.00

**DAILY REPORTER: LAPEL/PENDLETON, MARKLEVILLE, INGALLS TIMES/POST**

Notice of Guardianship Hearing                      \$100.00

**NO CASH ACCEPTED FOR PAPER COSTS.** You must provide a money order made out to the newspaper of your choice for the paper costs.

**COPIES ARE \$1.00 PER PAGE**

STATE OF INDIANA  
MADISON COUNTY

) IN THE CIRCUIT COURT \_\_\_\_\_  
)  
)SS: CAUSE NO. 48 \_\_\_\_\_

IN RE THE GUARDIANSHIP OF

\_\_\_\_\_  
Child

**VERIFIED PETITION FOR APPOINTMENT OF TEMPORARY  
GUARDIANS WITHOUT NOTICE AND HEARING**

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Comes now the petitioner, \_\_\_\_\_ (proposed  
guardian's name) and respectfully petitions the Court to appoint them as  
Temporary Guardian of \_\_\_\_\_ (child).

In Support of this request, the petitioner would respectfully show the Court as follows:

1. \_\_\_\_\_ (child) currently resides with  
\_\_\_\_\_ (name) \_\_\_\_\_,  
\_\_\_\_\_, IN \_\_\_\_\_ (address and zip code). \_\_\_\_\_ (phone)
2. \_\_\_\_\_ (child) was born on \_\_\_\_\_ (DOB) and is  
\_\_\_\_\_ years old and is incapacitated due to his/her minority.
3. \_\_\_\_\_ (child) has no real property or personal  
property other than some clothing and toys.
4. The petitioner has not been appointed guardian of any other person in any state.

STATE OF INDIANA

)  
)  
)SS:

IN THE CIRCUIT COURT \_\_\_\_\_

MADISON COUNTY

CAUSE NO. 48 \_\_\_\_\_

5. The petitioners reside at \_\_\_\_\_ (street address),  
Madison County, Indiana and their relationship to  
\_\_\_\_\_ (child) is that of \_\_\_\_\_  
relationship).

6. Reason or Reasons why guardianship should be established:

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7. What efforts have you made to let the natural parents know you are in the Probate office seeking a permanent guardianship order? \_\_\_\_\_

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If you have not advised the parents that you are seeking a permanent order why haven't you done so? \_\_\_\_\_

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STATE OF INDIANA

)

IN THE CIRCUIT COURT \_\_\_\_\_

)

MADISON COUNTY

)SS:

CAUSE NO. 48 \_\_\_\_\_

8. Have you contacted the police or Child Protective Services regarding this matter? Yes or No

If yes, what department or agency have you contacted? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I solemnly swear or affirm, under penalty for perjury, that the foregoing facts and representations are true to the best of our knowledge and belief.

\_\_\_\_\_  
(date)

\_\_\_\_\_  
(print name)

\_\_\_\_\_  
(signature)

STATE OF INDIANA ) IN THE SUPERIOR/CIRCUIT COURT \_\_\_\_\_  
MADISON COUNTY )SS: CAUSE NO. 48 \_\_\_\_\_

IN RE THE GUARDIANSHIP OF

\_\_\_\_\_  
Child

**OATH AND ACCEPTANCE OF GUARDIAN**

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1. I accept the appointment as guardian of the

PERSON

ESTATE

PERSON AND ESTATE

of \_\_\_\_\_ (child)

2. I will faithfully discharge the duties of my trust as such Guardian.

I affirm under the penalties for perjury that the foregoing representations are true.

\_\_\_\_\_  
(date)

\_\_\_\_\_  
(print name)

\_\_\_\_\_  
(signature)

STATE OF INDIANA

)

IN THE SUPERIOR/CIRCUIT COURT \_\_\_\_\_

MADISON COUNTY

)

)SS: CAUSE NO. 48 \_\_\_\_\_

IN RE THE GUARDIANSHIP OF

\_\_\_\_\_  
Child

**CONSENT TO THE APPOINTMENT OF A GUARDIAN BY A RELATIVE**

\_\_\_\_\_  
(your name), being sworn upon his/her oath,  
says that he/she is an adult and the natural father/mother of

\_\_\_\_\_  
(child's name) and is familiar with the Petition of

\_\_\_\_\_  
(your name) for the appointment of a guardian over the

person of \_\_\_\_\_  
(child's name) and consents to the appointment of

\_\_\_\_\_  
(your name) and hereby expressly waives service of

summons and notice of hearing on said guardianship petition.

\_\_\_\_\_  
(Signature)

SWORN TO ME AND SUBSCRIBED IN MY PRESENCE, A NOTARY PUBLIC IN AND  
FOR THE STATE OF INDIANA, COUNTY OF MADISON THIS \_\_\_\_\_ DAY OF  
\_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Expiration date

STATE OF INDIANA )  
 )  
MADISON COUNTY )

IN THE CIRCUIT COURT \_\_\_\_\_  
CAUSE NO. 48C \_\_\_\_\_

IN RE THE GUARDIANSHIP OF

\_\_\_\_\_  
Incapacitated Minor

MINORS CONSENT TO THE APPOINTMENT OF A \_\_\_\_\_ GUARDIAN  
(TEMPORARY/PERMANENT)

\_\_\_\_\_ (incapacitated minor), being sworn upon his/her  
Oath, says the he/she is a minor over the age of fourteen (14) years and is familiar with the  
petition of \_\_\_\_\_ (proposed guardian) for the appointment of a  
guardian over the person of \_\_\_\_\_ (incapacitated minor) and consents  
to the appointment of \_\_\_\_\_ (proposed guardian) and hereby  
expressly waives service of summons and notice of hearing on said guardianship petition.

\_\_\_\_\_  
Signature of Incapacitated Minor

Sworn to me and subscribed in my presence, A Notary Public in and for the State of Indiana, County of

\_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

STATE OF INDIANA

)

IN THE SUPERIOR/CIRCUIT COURT \_\_\_\_\_

MADISON COUNTY

)

)SS:

CAUSE NO. 48 \_\_\_\_\_

IN RE THE GUARDIANSHIP OF

\_\_\_\_\_  
Child

**PUBLISHED NOTICE FOR APPOINTMENT OF GUARDIAN**

\_\_\_\_\_ are/is notified that a Petition for Permanent Guardianship was filed in the office of the Clerk of Madison County Superior/Circuit Court, Anderson, Indiana.

To Contest said Petition, he/she must appear or file an answer in the above named Court before the hearing date of \_\_\_\_\_.

\_\_\_\_\_ he/she does not appear or file an answer to the Petition for Permanent Guardianship; the above named Court will hear the Petition and the same shall be determined in their absence.

Published \_\_\_\_\_



STATE OF INDIANA

IN THE MADISON CIRCUIT COURT, DIVISION \_\_\_\_\_

SS:

COUNTY OF MADISON

CAUSE NO.: \_\_\_\_\_

IN RE: THE GUARDIANSHIP OF

\_\_\_\_\_  
*Protected Person's Name*

### ADDRESSES

PLEASE LIST NAME, ADDRESS AND PHONE NUMBER OF ALL PARTIES INVOLVED:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Guardianship Registry Information Sheet

Minor       Adult,       Temporary       Permanent

Related Cases (List any cases in which the Protected Person is a party, e.g., CHINS)

**Petitioner**      Relationship to Protected Person \_\_\_\_\_

Last: \_\_\_\_\_ Suffix: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Hispanic?: Yes/No

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Attorney Name: \_\_\_\_\_ Bar Number: \_\_\_\_\_ App. Filed Date: \_\_\_\_\_

**Protected Person**      Estimated Value \$ \_\_\_\_\_

Last: \_\_\_\_\_ Suffix: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Hispanic?: Yes/No

Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ lbs

Scars, Marks, and Tattoos: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Attorney Name: \_\_\_\_\_ Bar Number: \_\_\_\_\_ App. Filed Date: \_\_\_\_\_

Guardian Ad Litem Full Name: \_\_\_\_\_

Interpreter required? Yes/No      Language: \_\_\_\_\_

Guardian  Check if same as petitioner       Certified (Only check if Federal or State Certified)

Last: \_\_\_\_\_ Suffix: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Hispanic?: Yes/No

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Attorney Name: \_\_\_\_\_ Bar Number: \_\_\_\_\_ App. Filed Date: \_\_\_\_\_

**Guardian Institution**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Agent Name: \_\_\_\_\_

**Close Relative (Entitled to Notice)**      Relationship to Protected Person \_\_\_\_\_

Last: \_\_\_\_\_ Suffix: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Hispanic?: Yes/No

Mailing Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

# Guardianship Registry Information Sheet

(Additional)

**Petitioner** Relationship to Protected Person \_\_\_\_\_

Last: \_\_\_\_\_ Suffix: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_  
DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Hispanic?: Yes/No  
Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Attorney Name: \_\_\_\_\_ Bar Number: \_\_\_\_\_ App. Filed Date: \_\_\_\_\_

**Guardian**  Check if same as petitioner  Certified (Only check if Federal or State Certified)

Last: \_\_\_\_\_ Suffix: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_  
DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Hispanic?: Yes/No  
Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Attorney Name: \_\_\_\_\_ Bar Number: \_\_\_\_\_ App. Filed Date: \_\_\_\_\_

**Close Relative (Entitled to Notice)** Relationship to Protected Person \_\_\_\_\_

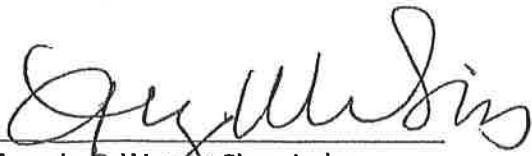
Last: \_\_\_\_\_ Suffix: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_  
Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Hispanic?: Yes/No  
Mailing Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**Interested Party**

Last: \_\_\_\_\_ Suffix: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_  
Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Hispanic?: Yes/No  
Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**Interested Party**

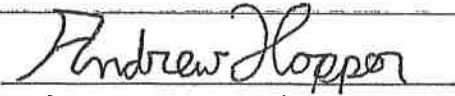
Last: \_\_\_\_\_ Suffix: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_  
Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Hispanic?: Yes/No  
Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_



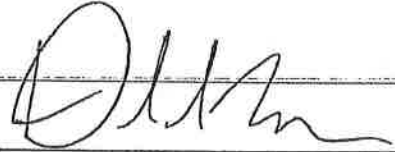
Angela G. Warner Sims, Judge  
Madison County Circuit Court Division 1



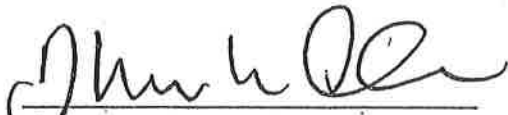
G. George Pancel, Judge  
Madison County Circuit Court Division 2



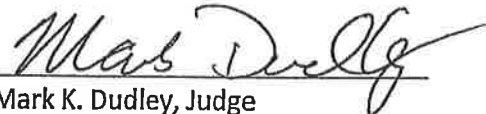
Andrew R. Hopper, Judge  
Madison County Circuit Court Division 3



David A. Happe, Judge  
Madison County Circuit Court Division 4



Thomas L. Clem, Judge  
Madison County Circuit Court Division 5



Mark K. Dudley, Judge  
Madison County Circuit Court Division 6

I acknowledge receipt of a copy of the above instructions and have read and will follow these instructions carefully.

\_\_\_\_\_  
Cause Number

\_\_\_\_\_  
Protected Person (printed)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Guardian (printed)

\_\_\_\_\_  
Guardian (signature)

STATE OF INDIANA

)

IN THE SUPERIOR/CIRCUIT COURT \_\_\_\_\_

MADISON COUNTY

)

)SS: CAUSE NO. 48 \_\_\_\_\_

IN RE THE GUARDIANSHIP OF

\_\_\_\_\_  
Childs name

**ORDER GRANTING VERIFIED PETITION FOR APPOINTMENT OF  
TEMPORARY GUARDIAN**

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Come now the petitioner \_\_\_\_\_ (your name),  
and file their Verified Petition for Appointment of Temporary Guardian Without Notice and  
Hearing. And the Court, having read and reviewed said Petition, enters the following findings  
and orders:

1. That \_\_\_\_\_ (child name) is incapacitated due to his/her  
minority.
2. That \_\_\_\_\_ (child name) has no real property or personal  
property other than some clothing and toys.
3. That the petitioners have not been appointed guardians of any other person in this state.
4. That \_\_\_\_\_ (child name) was born on  
\_\_\_\_\_.

STATE OF INDIANA ) IN THE SUPERIOR/CIRCUIT COURT \_\_\_\_\_  
 )  
MADISON COUNTY )SS: CAUSE NO. 48 \_\_\_\_\_

5. That the petitioners have had physical custody of \_\_\_\_\_ (child name), since \_\_\_\_\_ (date) when \_\_\_\_\_ (child name) was left with the petitioners by \_\_\_\_\_ (biological parent name).
6. That no guardian has been appointed for \_\_\_\_\_ (child), that an emergency exists that the welfare of \_\_\_\_\_ (child) requires immediate action concerning \_\_\_\_\_ (child).
7. That immediate and irreparable injury to the person of \_\_\_\_\_ (child) may result unless the Court grants temporary guardianship to petitioners without notice and hearing.
8. That the petitioners \_\_\_\_\_ (your name) are/is suitable and willing to serve as temporary guardians of \_\_\_\_\_ (child).
9. That said temporary guardianship is necessary and in \_\_\_\_\_ (child) best interest.

STATE OF INDIANA

)

IN THE SUPERIOR/CIRCUIT COURT \_\_\_\_\_

)

MADISON COUNTY

)SS:

CAUSE NO. 48 \_\_\_\_\_

10. That a hearing on said continuing guardianship shall be scheduled for the

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ at \_\_\_\_\_

am/pm, and that notice shall be given to the persons most closely related to

\_\_\_\_\_ (child name), as listed in the petition, by the best means

possible, pursuant to IC 29-3-6.

11. That \_\_\_\_\_ ( your name) are

hereby appointed temporary guardians of \_\_\_\_\_ (child),

without limitations on their duties, pending the hearing, and the Clerk shall issued Letters

of Temporary Guardianship to the petitioners

\_\_\_\_\_ (your name).

\_\_\_\_\_  
DATE

\_\_\_\_\_  
JUDGE OF MADISON COUNTY SUPERIOR/CIRCUIT COURT \_\_\_\_