

The following instructions are provided as a general guideline to help persons who are applying to be appointed guardian of an alleged incompetent. These instructions are not comprehensive and may not apply in every case.

The employees of the Court are not allowed to give legal advice. This means that they cannot give you advice that is specific to your case and cannot help you fill out forms.

If you need case-specific advice or help filling out forms, you are strongly encouraged to speak with an attorney who is experienced in guardianship matters.

INSTRUCTIONS

- Write the proposed ward's name on the "**GUARDIANSHIP OF**" blank at the top of each of form. Complete the rest of the form as instructed below or as instructed on the form.
- The Court will write the case number on the "**CASE NO**" blank at the top of each form. The Court will fill in blanks for hearing dates and times and for signatures of the Judge, Magistrate, or other Court Employees.

Next of Kin of Proposed Ward	Form 15.0	Provide the requested information. Sign on the Applicant's Signature blank.
Judgment Entry Setting Hearing on Application for Appointment of Guardian	Form 15.01	Write your name on the first blank and the proposed ward's name on the second blank.
Waiver of Notice and Consent	Form 15.1	Write your name on the first blank and the proposed ward's name on the second blank. All next of kin who are waiving service must sign on the signature blank.
Fiduciary's Acceptance – Guardian	Form 15.2	Sign on the Fiduciary's Signature blank.
Guardian's Bond	Form 15.3	If you are applying for guardianship of the estate: Provide the requested information and check the appropriate boxes. Sign on the Principal's Signature blank. The bonding agent must sign on the Attorney-in-Fact's Signature blank. Attach the power of attorney for the bonding agent.
Letters of Guardianship	Form 15.4	Check the appropriate boxes. Write your name on the first blank and the proposed ward's name on the second blank. You must type this form.
Oath of Guardian	Form 15.9	Write your name on the first blank and the proposed ward's name on the second blank.

Application for Appointment of Guardian of Alleged Incompetent	Form 17.0	Check the appropriate boxes and provide the requested information. Sign on the Applicant's Signature blank.
Statement of Expert Evaluation	Form 17.1	A licensed physician or licensed clinical psychologist must provide the requested information and sign on the signature blank. The date of evaluation must be within 3 months of the filing of the application.
Service Information	M.C. Form 5D	Instructions are on form.
Applicant's Report	M.C. Form 5E	Instructions are on form.
Guardian Receipt	Form 27.12M	Instructions are on form.
Acknowledgment of Duty to Notify Court of Change of Residence	M.C. Form 17.0B	Instructions are on form.
Affidavit – Search for Address	M.C. Form 110	If you are unable to determine addresses of one or more next of kin: Instructions are on form.
BCI Background Check		Information regarding how to obtain a BCI Background Check is on the last two pages of this packet.

BCI BACKGROUND CHECK INFORMATION FOR GUARDIANSHIP AND ADULT NAME CHANGE APPLICANTS

DO I NEED TO SUBMIT A BCI BACKGROUND CHECK? You must submit an Ohio Bureau of Criminal Identification and Investigation (“BCI”) background check if:

1. You are a resident of Ohio; **and**
2. You are filing an application for guardianship of an adult or minor; **or**
3. You are filing an application for name change of an adult.*

*If you are filing an application for a name change, you must submit the BCI background check using **your current legal name**.

REQUESTING A BCI BACKGROUND CHECK

How do I request a BCI background check? To request a background check, you must visit a provider in this state and ask for a Request for a Background Check. You must complete the Request and submit it to the provider. A sample Request is on the following page.

Where can I request a BCI background check? A list of local providers is on the following pages. Additional providers are listed on the Ohio Attorney General’s website. Many of these providers require that you call first to schedule an appointment.

How much does it cost to request a BCI background check? The fee for a background check is typically \$30 - \$40. Many providers require that you pay this fee in cash.

SUBMITTING A BCI BACKGROUND CHECK

How do I submit my BCI background check to the Probate Court? The Request for a Background Check will ask where you would like your background check to be mailed. Please answer that you would like for your background check to be mailed to:

Montgomery County Probate Court
41 North Perry Street, Second Floor
Dayton, Ohio 45422

How long will it take for the Probate Court to receive my BCI background check? Your background check should arrive at the Probate Court within 3 – 30 days. When it arrives, it will be filed in your case.

Can I file my application for guardianship or application for name change before the Probate Court receives my BCI background check? Yes. You may file your application before **or** after the Probate Court receives your background check. However, please keep in mind that the Court cannot grant your application until it has received your background check. You may call the Court at 937-225-4640 to ask whether it has received your background check.

PLEASE NOTE: If you are not a resident of Ohio, you must submit a criminal background check completed by law enforcement in your state of residence.

REQUEST FOR A BACKGROUND CHECK VIA ELECTRONIC FINGERPRINTING

BCI ONLY

FBI ONLY

BCI & FBI

Personal Information

Name John Doe (applicant's current legal name) Address 123 Street

Date of Birth 1/1/1965 SSN XXX-XX-XXXX Address _____

Phone # 937-555-5555 City Dayton

Email JohnDoe@email.com State Ohio Zip 45402

Race: Asian or Pacific Islander African American Caucasian or Hispanic Descent
 Middle Eastern Native American Other

Reasons for background check: BCI: Other (applying for guardianship)
Other (applying for name change) FBI: _____

Name & Address for results to be mailed:

Montgomery County Probate Court
41 N. Perry Street, Second Floor
Dayton, Ohio 45422

Direct copy to (circle only one)

BMV Dealer Licensing
Ohio Dept. of Education
Ohio Board of Nursing
Ohio Dept. of Public Safety
Ohio Dept. of Liquor Control
Ohio State Racing Commission
Ohio Department of Insurance
Respiratory Care Board
None

I certify that the personal identifiers provided on this form are accurate and I voluntarily and knowingly authorize the Ohio Bureau of Criminal Identification and Investigation to conduct a criminal records check for the information relating to me. I also voluntarily and knowingly authorize BCI&I to disseminate criminal arrest, conviction and juvenile delinquency adjudication records to the parties indicated above. I voluntarily and knowingly release and discharge the Ohio Attorney General's Office, BCI&I and their employees and the License Bureau and their employees for all claims and liability related to this authorized criminal record review and dissemination.

John Doe
Applicant's Name (please print)

Parent/Guardian's Name (if applicant is minor)

John Doe 1/1/2017
Applicant's Signature Date

Parent/Guardian's Signature (if applicant is minor)

Important Notice: By signing this form the Applicant acknowledges that all information on this form is accurate. Any mistakes or errors on this form are the responsibility of the Applicant if a background check must be resubmitted for incorrect information Applicant agrees that an additional fee will be charged.

Witness's Name (please print)

Witness's Signature

For Official Use Only

Identification presented:

DL _____ state: _____ DL# _____ Exp. Date _____ (cannot be expired)
 ID _____ state: _____ ID# _____ Exp. Date _____ (cannot be expired)
 Passport _____ Country _____ Exp. Date _____ (cannot be expired)
Webcheck # _____ Date _____

LIST OF LOCAL BCI BACKGROUND CHECK PROVIDERS

Centerville License Bureau 104 West Spring Valley Road Centerville, Ohio 45458 (937) 435-5970	Mon. – Fri.	9:00 a.m. – 4:00 p.m.
Clayton License Bureau 8389 North Main Street Dayton, Ohio 45415 (937) 454-5222	Mon. – Fri. Sat.	8:00 a.m. – 5:00 p.m. 8:00 a.m. – 2:00 p.m.
Dayton Police Department 335 West Third Street Dayton, Ohio 45402 (937) 333-1049	Mon. – Fri.	8:00 a.m. – 10:00 a.m.
Huber Heights License Bureau 6134 Chambersburg Road Huber Heights, Ohio 45424 (937) 233-7211	Mon. – Tues. Thurs. – Fri. Wed. Sat.	8:00 a.m. – 5:00 p.m. 8:00 a.m. – 6:00 p.m. 8:00 a.m. – 2:00 p.m.
Kettering Police Department 3600 Shroyer Road Kettering, Ohio 45429 (937) 296-2580 (937) 296-2555	Tues. – Fri.	9:00 a.m. – 3:00 p.m.
Miamisburg Police Department 10 North First Street Miamisburg, Ohio 45342 (937) 847-6617	Tues., Thurs.	10:00 a.m. – 12:00 p.m.
West Carrollton License Bureau 1162 East Dixie Drive West Carrollton, Ohio 45449 (937) 866-9511	Mon. Wed. – Fri. Tues. Sat.	8:00 a.m. – 5:00 p.m. 8:00 a.m. – 6:30 p.m. 8:00 a.m. – 2:00 p.m.
Moraine Police Department 4200 Dryden Road Moraine, Ohio 45439 (937) 535-1163	Mon. – Thurs.	9:00 a.m. – 3:00 p.m.