

Notarized Guardianship Consent

Date:

I, (Full Name of Parent/Guardian):

Address:

Relationship to Minor:

Hereby give my consent for (Full Name of Minor):

Date of Birth of Minor:

To be placed under the temporary guardianship of (Full Name of Guardian):

Guardian's Address:

Duration of Guardianship (From - To):

Special Instructions or Limitations (if any):

I confirm that I am the legal parent or guardian of the above-named minor, and I authorize the named guardian to act on my behalf in all matters relating to the care and well-being of said minor for the duration stated above.

Parent/Guardian Signature

Date

NOTARY PUBLIC

State of:

County of: _____

On this _____ day of _____, before me, the undersigned notary public, personally appeared _____

_____, proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to this document, and acknowledged that they executed the same.

Notary Public Signature

My Commission Expires

Notary Seal: _____