Temporary Military Deployment Guardianship Form Service Member Information Name Rank Branch Unit **Contact Information Deployment Location Deployment Dates** Child(ren) Information Name(s) Date(s) of Birth **Temporary Guardian Information** Name Relationship to Child(ren) Address Phone Number

Email

Responsibilities and Authorization
Please specify any specific responsibilities or limitations for the temporary guardian (if any):
Additional Information
Medical Information, Insurance Details, or Other Notes:
Service Member Signature
Date
Temporary Guardian Signature
Date