

IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT,  
IN AND FOR MIAMI-DADE COUNTY, FLORIDA

PROBATE DIVISION

IN RE: GUARDIANSHIP OF \_\_\_\_\_

Ward.

Case no.: \_\_\_\_\_

Section: \_\_\_\_\_

**CC-102**

**Checklist and Certification – Appointment of Guardian of the Minor**

I, \_\_\_\_\_, as the attorney of record, have reviewed the applicable checklist(s) on the 11<sup>th</sup> Judicial Circuit Court's website, and filed the following pleadings to the Clerk of Court's docket, for which I have written the docket entry number next to each of the corresponding requirements below:

Original Documents:

\_\_\_\_\_  Original certified copy of Ward's birth certificate has been deposited with the Clerk of Courts

Petition for Appointment of Guardian:

\_\_\_\_\_  Petition for Appointment of Guardian - Fla. Sta. §744.344; Fla. Prob. R. 5.555(c)

\_\_\_\_\_  Waiver and Consent to Appointment of Guardian by any natural parent who did not sign the petition OR Proof of Formal Notice, death, or unavailability – Fla. Stat. §744.3371(2); Fla. Prob. R. 5.180

Depository:

\_\_\_\_\_  Petition for Restricted Depository OR

\_\_\_\_\_  Petition to Waive Restricted Depository for Social Security Benefits only\* OR

\_\_\_\_\_  Depository is not necessary only a Guardian of the Person is being appointed

Supporting Documents (ALL must be filed):

\_\_\_\_\_  Guardianship Application (Smart Form) – Fla. Prob. R. 5.590

\_\_\_\_\_  Submission of fingerprints via Livescan and FDLE Report is filed to docket – Fla. Stat. §744.3135

\_\_\_\_\_  Oath of Guardian and Designation and Acceptance of Resident Agent – Fla. Sta. §744.347; Fla. Prob. R. 5.110 and 5.600

\_\_\_\_\_  Affidavit of Kin (Form G-17). A Supplemental Affidavit (Form G-XSD) must only be filed when additional space needed.

\_\_\_\_\_  Notice of Related Cases (Smart Form) – Administrative Order 14-09

**Proposed Orders submitted to courtMAP:**

Order Appointing Guardian:  of the Property (Form G-6)  Of the Person (Form G-16)

Letters of Guardianship:  of the Property (Form G-3)  Of the Person (Form G-4)

Order Designating Depository for Assets (Form G-5) OR

Order Waiving Depository Requirements for Social Security Benefits (Form A-10)

**I HEREBY CERTIFY** that I have complied with the above checklist and filed the required pleadings and supporting documentation on the date indicated above in accordance with applicable Florida Statutes, Florida Probate Rules, local rules, administrative orders, and administrative memoranda. I understand that submission of this checklist is considered an official statement subject to Fla. Stat. §837.06.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Attorney's Signature

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

Bar Number: \_\_\_\_\_

Email Address(es): \_\_\_\_\_