

**This form MUST be filled out COMPLETELY with all requested information.  
 Any petitions which are incomplete may be denied. Be sure to PRINT legibly.  
 Please Note: The minor(s) must be present at the guardianship hearing**

IN THE MATTER OF \_\_\_\_\_ : IN THE COURT OF COMMON PLEAS  
 THE ESTATE OF: \_\_\_\_\_ : OF ERIE COUNTY, PENNSYLVANIA  
 \_\_\_\_\_ : FAMILY / ORPHANS' COURT DIVISION  
 \_\_\_\_\_, Minor(s): No. \_\_\_\_\_

**PETITION FOR APPOINTMENT OF PLENARY OR LIMITED GUARDIAN  
 OF THE PERSON AND/OR ESTATE OF A MINOR OR MINORS**

1. **MINOR(S)** List the name, age, date of birth, religious affiliation and full street address of all Minor(s).  
*Note: Any Minor(s) over 14 years old, must be a Petitioner.*

Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_\_ Religion \_\_\_\_\_  
 \_\_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_\_ Religion \_\_\_\_\_  
 \_\_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

2. **PETITIONERS** List the name, date of birth, religious affiliation, marital status, employment, telephone numbers, and relationship of all Petitioners.

Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_\_ Religion \_\_\_\_\_  
 \_\_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Place of Employment \_\_\_\_\_ Marital Status \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 \_\_\_\_\_ Work Phone: \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_\_ Religion \_\_\_\_\_  
 \_\_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Place of Employment \_\_\_\_\_ Marital Status \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 \_\_\_\_\_ Work Phone: \_\_\_\_\_

3. **PETITIONER'S HOUSEHOLD**

- a. Are any of the Petitioners related to the Minor(s)?  Yes  No  
If so, how are they related? \_\_\_\_\_
- b. Are there other adults living in the Petitioner's household?  Yes  No  
If so, list the names, dates of birth \_\_\_\_\_ of all other adults in the household.  
\_\_\_\_\_  
\_\_\_\_\_
- c. Please describe how and when the Minor(s) was/were placed in your care: \_\_\_\_\_  
\_\_\_\_\_

4. **MINOR'S PARENTS** List the names and full addresses of both parents of the Minor(s).

Mother \_\_\_\_\_ If Deceased, date of death \_\_\_\_\_

Street Address City State Zip

Father \_\_\_\_\_ If Deceased, date of death \_\_\_\_\_

Street Address City State Zip

5. **CONSENTS** Consents of the Petitioners, both Parents and the Minor(s), if over age 14 must be obtained.

- a. Does the Mother consent to this guardianship?  Yes  NO **Consent must be attached**
- b. Does the Father consent to this guardianship  Yes  No **Consent must be attached**
- c. Are any of the Minors over age 14?  Yes  No **Consent must be attached**
- d. If the Parental Consents are not attached, state why the Parent does not consent, or why their consent has not been obtained \_\_\_\_\_

6. **OTHER PROCEEDINGS**

- a. Has there ever been a Custody action for the Minor(s)  Yes  No **Order must be attached**  
If so, state the Court, State or jurisdiction and docket number \_\_\_\_\_
- b. Has there ever been a Guardianship for the Minor(s)  Yes  No **Order must be attached**  
If so, state the Court, State or jurisdiction and docket number \_\_\_\_\_

7. **AGENCIES**

- a. Has any Children's Services/ OCY Agency ever been involved with the Minor(s)?  Yes  No
- b. Has any Children's Services/OCY Agency ever been involved with the Petitioner(s)?  Yes  No
- c. If so, please provide details of that involvement and indicate whether the case is open or closed.  
\_\_\_\_\_  
\_\_\_\_\_

8. **REASON FOR GUARDIANSHIP** State why appointment of a guardian for the Minor(s) is necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 9. Does the proposed Guardian have any interest adverse to that of the Minor(s)?  Yes  No  
If so, state the nature of the adverse interest \_\_\_\_\_

**10. FINANCIAL INFORMATION**

- a. Do any of the Minors have assets? (other than clothing or small personal items)  Yes  No
- b. Do any of the Minors have income of any type?  Yes  No
- c. Do any of the Minors receive Social Security benefits of any type?  Yes  No
- d. Is/are the Minor(s) entitled to Veterans benefits from either parent?  Yes  No
- e. Is/are the Minor(s) entitled to funds from an estate, civil action or any other claim?  Yes  No

If so, please provide **specific information** as to the Minor(s) assets, income, benefits, or claims below

<i>Type of asset, income, or benefits or claim</i>	<i>Current Value</i>	<i>Account No. or Location</i>

Wherefore, your Petitioner(s) request(s) to be appointed as the Guardian of the Minor(s) Person and/or Estate.

Respectfully Submitted,

Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Petitioner*

Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Petitioner*

Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Minor if over age 14*

Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Minor if over age 14*

IN RE:

\_\_\_\_\_

\_\_\_\_\_

:  
:  
:  
:  
:

IN THE COURT OF COMMON PLEAS

OF ERIE COUNTY, PENNSYLVANIA

Family / Orphans' Court Division

Minor(s):

No. \_\_\_\_\_

**VERIFICATION**

I/We hereby acknowledge reading the foregoing petition and hereby verify that the facts stated therein are true and correct to the best of my/our knowledge, information and belief.

I/We understand that any false statements made herein are subject to the penalties of 18 Pa.C.S.A. §4904, relating to unsworn falsification to authorities.

Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Petitioner*

Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Petitioner*

Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Minor if over age 14*

Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Minor if over age 14*

IN RE:

: IN THE COURT OF COMMON PLEAS

: OF ERIE COUNTY, PENNSYLVANIA

: Family / Orphans' Court Division

\_\_\_\_\_

Minor(s) : No. \_\_\_\_\_

**CONSENT OF PARENTS**

We, \_\_\_\_\_ the  
Parent(s) of the above-captioned Minor(s) hereby consent to the appointment of  
\_\_\_\_\_ as Guardian(s) of  
his/her/their Person and/or Estate.

Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Mother*

Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Father*

IN RE:

: IN THE COURT OF COMMON PLEAS

: OF ERIE COUNTY, PENNSYLVANIA

: Family / Orphans' Court Division

\_\_\_\_\_

: No. \_\_\_\_\_

\_\_\_\_\_, Minor(s)

**CONSENT OF MINOR(S) OVER THE AGE OF 14**

As a Minor(s) over the age of 14, I/We do hereby consent to the appointment of

\_\_\_\_\_

as the Guardian(s) of my/our Person and/or Estate.

Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Minor*

Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Minor*

IN THE MATTER OF  
THE ESTATE OF

\_\_\_\_\_

Minor (s)

:  
:  
:  
:  
:  
:  
:

IN THE COURT OF COMMON PLEAS  
OF ERIE COUNTY, PENNSYLVANIA

FAMILY / ORPHANS' COURT DIVISION

NO. \_\_\_\_\_

RULE TO SHOW CAUSE

AND NOW, to-wit, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, upon consideration of the foregoing Petition For Appointment Of Plenary Or Limited Guardian of the Person And/Or Estate Of A Minor Or Minors, a Rule is hereby granted to show cause why the prayer should not be granted. Said Rule is returnable on \_\_\_\_\_, 20\_\_\_\_\_, at \_\_\_\_\_ .m., in Courtroom \_\_\_\_\_, Erie County Court House, Erie, Pennsylvania before the Honorable \_\_\_\_\_.

BY THE COURT:

\_\_\_\_\_  
Judge

IN RE: \_\_\_\_\_ : IN THE COURT OF COMMON PLEAS  
: OF ERIE COUNTY, PENNSYLVANIA  
: Family / Orphans' Court Division  
\_\_\_\_\_, Minor(s) : No. \_\_\_\_\_

**FINAL GUARDIANSHIP ORDER**

**AND NOW**, to wit this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ upon consideration of the foregoing petition and after hearing and full consideration of the testimony and evidence presented it is hereby **ORDERED, ADJUDGED AND DECREED**:

1. \_\_\_\_\_ is / are hereby appointed as the Guardian(s) of the Person and / or Estate of \_\_\_\_\_ Minor(s).
2. Within ninety (90) days of the date of this Order, the Guardians(s) shall file an Inventory listing all of the assets and income of the Minor(s) with the Clerk of the Orphans' Court.
3. Within sixty (60) days after the Minor attains the age of eighteen (18), the Guardian(s) shall file a Final accounting with the Clerk of the Orphans' Court, pursuant to 20 Pa.C.S. A. §5319(c).

**BY THE COURT:**

\_\_\_\_\_  
**JUDGE**