

Child Guardianship Form

Guardian Details:

- Full Name: _____
- Relationship to Child: _____
- Address: _____
- Contact Number: _____

Child Details:

Full Name	Date of Birth	Current Address	School Name

Purpose of Guardianship:

- Temporary/Long-term custody
- Educational decision-making
- Medical decision-making
- Other: _____

Consent from Parent/Current Legal Guardian:

I, [Insert Parent Name], consent to appoint [Insert Guardian Name] as the legal guardian of my child.

Parent Signature: _____

Date: _____

Guardian Agreement:

I, [Insert Guardian Name], agree to fulfill the responsibilities of a legal guardian.

Guardian Signature: _____

Date: _____