

IN THE CIRCUIT COURT OF THE FIFTH JUDICIAL CIRCUIT,
IN AND FOR LAKE COUNTY, FLORIDA

PROBATE DIVISION

IN RE: GUARDIAN ADVOCACY OF _____,

CASE NO. _____

APPLICATION FOR APPOINTMENT AS SUCCESSOR GUARDIAN ADVOCATE

(FORM A1)

Pursuant to Section 393.12, Florida Statutes, the undersigned submits this Application for Appointment as Successor Guardian Advocate of _____, (the person with a developmental disability) and submits the following information (if the space provided is insufficient, attach additional pages):

1. Name: _____
2. Age: _____
3. Residence Address: _____
4. Mailing Address: _____

5. U.S. Citizen? ☐ Yes ☐ No

6. Employer's Name and Address: _____

Applicant's Position: _____

7. Home Telephone Number: _____

Work Telephone Number: _____

8. If currently serving as guardian/guardian advocate for any other ward, list names of each ward, court file number(s), circuit court(s) in which case(s) is/are pending and whether applicant is acting as the limited or plenary guardian or guardian advocate of the person or property or both:

9. Does applicant have any physical disabilities? ☐ Yes ☐ No

If yes, please describe and state whether such disability may affect applicant's ability, in any degree, to serve as guardian advocate:

10. Has applicant ever been treated for the following:

a. Mental Condition ☐ Yes ☐ No

b. Alcohol ☐ Yes ☐ No

c. Drugs ☐ Yes ☐ No

d. Other ☐ Yes ☐ No

Nature of condition and summary of treatment:

11. Has applicant ever been judicially determined to have committed abuse or neglect against a child as defined by Florida law? ☐ Yes ☐ No

12. Has applicant ever been the subject of a confirmed report of abuse, neglect, or exploitation which has been uncontested or upheld pursuant to the provisions of Sections 415.104 and 415.1075, Florida Statutes? ☐ Yes ☐ No

13. Has applicant ever been charged with fraud, misrepresentation or perjury in a judicial or administrative proceeding? ☐ Yes ☐ No

If yes, please give date and complete details:

14. Has applicant ever been charged with, arrested for or convicted of a felony?

☐ Yes ☐ No

If yes, please furnish details including date, type of offense, location, and final disposition:

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15. Has applicant ever been charged with, arrested for or convicted of any other crimes?

☐ Yes ☐ No

If yes, please furnish details including date, type of offense, location, and final disposition:

16. Has applicant ever held a position which required bonding? ☐ Yes ☐ No

If yes, please describe position, date, amount of bond, and name of surety:

17. Has applicant, in the past, ever served as guardian/guardian advocate of a person or of a person's property? ☐ Yes ☐ No

If yes, please describe below, including reason for termination of guardianship:

18. Has applicant ever been held in contempt of court or removed as a guardian/ guardian advocate? ☐ Yes ☐ No

If yes, please describe below:

19. Has applicant ever filed for bankruptcy? ☐ Yes ☐ No

If yes, please state date and location of court:

20. What is applicant's relationship with the person with a developmental disability?
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21. Is applicant, or applicant's business, corporation, or other business entity a creditor of, or providing professional, personal, or business services to the person with a developmental disability? ☐ Yes ☐ No

If yes, please furnish details below:

22. Is applicant employed by a business, corporation, or other business entity which is providing professional, personal, or business service to the person with a developmental disability? ☐ Yes ☐ No

If yes, please furnish details below:

23. Is applicant a health care provider for the person with a developmental disability?

☐ Yes ☐ No

24. Educational history of applicant:

	Name and Address	Degree	Date
High School:	<hr/>		
College:	<hr/>		
Other:	<hr/>		

25. List applicant's employment experience for the past ten (10) years beginning with the most recent date:

Name and Address	Date	Reason for Leaving
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26. Has applicant ever been discharged from employment by any employer listed above?

☐ Yes ☐ No. If yes, please explain:

27. Does applicant possess any special educational qualifications (financial, business or otherwise) that uniquely qualifies applicant to be appointed as guardian advocate?

☐ Yes ☐ No. If yes, please describe below:

28. Has applicant received instruction and training which covered the legal duties and responsibilities of guardian/guardian advocate, the rights of an incapacitated person or Ward, the availability of local resources to aid a Ward, and the preparation of habitual plans and annual guardian advocate reports, including financial accounting for the ward's property? ☐ Yes ☐ No

29. If so, indicate when and where training was received:

Under penalties of perjury, I declare that I have read the foregoing, and the facts alleged are true, to the best of my knowledge and belief.

Signed on _____, 20_____.

Applicant