



☐ CIRCUIT ☐ ORPHANS' COURT FOR _____, MARYLAND
City/County

Located at _____ Case No. _____
Court Address

In the Matter of _____

Name of Minor or Alleged Disabled Person

Docket Reference

PROSPECTIVE GUARDIAN INFORMATION SHEET (Md. Rule 10-111 and 10-112)

NOTE: Use this form if you want the court to appoint you as guardian of a minor or alleged disabled person, but you are not the petitioner (the person asking the court to appoint a guardian for the minor or alleged disabled person).

I, _____, _____, whose address is
Your Name Age
_____, whose telephone
Address
number is _____, and whose email address (if available) is _____,
state to the court that:

1. My relationship to the minor or alleged disabled person is

2. (Check only one of the following boxes)

- ☐ I have not been convicted of a crime listed in Md. Code, Estates and Trusts Article, § 11-114, or
☐ I was convicted of such a crime, namely:

_____, in _____, but the following good cause
exists for me to be appointed as guardian: _____

I solemnly affirm under the penalties of perjury that the contents of this document are true to the best of my knowledge, information, and belief.

Date

Prospective Guardian's Signature

Printed Name