

STATE OF MAINE

PROBATE COURT

County: _____

Docket No. _____

DISTRICT COURT

Location: _____

Docket No. _____

IN RE: _____
(Minor Name)

ACCEPTANCE OF APPOINTMENT BY
GUARDIAN OF MINOR
18-C M.R.S. § 5-109

My name is: _____

1. I have petitioned to be guardian of a minor or a petition has named me as proposed guardian.
2. I agree to be the appointed:
 - Guardian of minor on an emergency basis;
 - Guardian of a minor on an interim basis;
 - Guardian of minor.
3. I am familiar with my responsibilities as a guardian, as set forth in 18-C M.R.S. § 5-207.
4. I understand the duration of my appointment is:
 - No more than 90 days (guardianship on an emergency basis);
 - No more than six (6) months or pending the court's final order, unless agreed to by the parties; or
 - Until the minor child reaches majority or as otherwise specified in the Order Appointing Guardian of Minor.
5. I submit personally to the jurisdiction of this Court in any proceeding relating to this guardianship.
6. I accept my responsibilities as guardian willingly and without reservation, believing this appointment to be in the best interest of the minor.

Dated: _____

Signature of Guardian

Name: _____

Address: _____

Phone Number: _____

Email: _____

STATE OF MAINE

_____ COUNTY

Personally appeared the above named _____, and made oath that the foregoing statements are true.

Before me,

Date: _____

Attorney at Law / Notary Public / Register / Clerk