



JUDICIAL BRANCH CERTIFICATION COMMISSION

Office of Court Administration

Guardianship Certification

Application for Provisional Certification

Please Type or Print Legibly

Provisional Applicant. (Fee: \$25.00)

Application fee must be submitted with completed application. **Fees must be in the form of a check, money order, or cashier's check payable to the Office of Court Administration.**

Submit application with payment to:

P O Box 12066, Austin, TX 78711-2066 **or** 205 W. 14th St., Ste. 600, Austin, TX 78701

(All fields must be completed. Notifications to applicants will be sent via email.)

Applicant Information	
Full Legal Name: <i>(Last, Suffix, First, Middle)</i>	
Name you would like on your certification: <i>(Last, Suffix, First, Middle)</i>	

Date of Birth:		Email Address:			
Mailing Address:					
Phone #:		Cell #:		Fax #:	

Business Contact Information					
(This information will be publicly available. If left blank, mailing address above will be used for business contact purposes.)					
Employer: <i>(Name, if self-employed)</i>					
Business Address:					
Phone #:		Fax #:		Email Address:	

Education	High School/ GED	<input type="checkbox"/> High School Diploma <input type="checkbox"/> GED ____ Month/Year					
	Name and City, State of school:						
	College or University	Name and City, State of School	Dates Attended				Degree
		From		To			
		Mo	Yr	Mo	Yr		

Work Experience <i>(provide at least 2-3 years of experience. Attach separate sheet if necessary)</i>	Start Date		Leave Date		Employer:	City, State :
	Mo	Yr	Mo	Yr		
			Current			
	Describe experience:					
	Start Date		Leave Date		Employer:	City, State :
	Mo	Yr	Mo	Yr		
Describe experience:						

NOTE: Under Commission rules, a provisionally certified guardian may provide guardianship services *only under the supervision of a certified guardian supervisor*. A certified guardian supervisor may not be a relative or an employee, or be under the employment supervision, of the person for whom he or she is the designated certified guardian supervisor.

Certified Guardian Supervisor Information					
Name & Certification Number <i>(Last, Suffix, First, Middle, & Cert. #):</i>					
Employer: <i>(Name, if self-employed)</i>					
Business Address:					
Phone #:		Fax #:		Email Address:	
Signature of Certified Guardian Supervisor:					Date Signed:

<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever had a professional license, certification, or registration of any kind which was denied, suspended, or revoked in Texas or any other jurisdiction?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been relieved of responsibilities as a guardian by a court, employer, or client for actions involving fraud, moral turpitude, misrepresentation, material omission, misappropriation, theft, assault, battery, abuse, neglect, breach of trust, breach of fiduciary duty or conversion?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Has your authority to be a guardian ever been terminated, vacated, or sanctioned in Texas or any other jurisdiction?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been found civilly liable or settled a claim in an action, including but not limited to a surcharge action, involving allegations of fraud, misrepresentation, material omission, misappropriation, theft, assault, battery, abuse, neglect, breach of trust, breach of fiduciary duty or conversion on your part?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever adjudged guilty of or entered a plea of guilty or no contest in return for a grant of deferred adjudication to any felony or misdemeanor offense. <input type="checkbox"/> Yes, but information was previously reported to, and considered by, the Commission. <i>(No documentation is required to be submitted).</i>

If you answered yes to any of the above questions, please attach a written statement providing dates, and explanation of circumstances for each 'yes' above and attach it to this application.

As part of the application process, I understand and agree that:

- My criminal history record information will be obtained by fingerprint search.
I must follow the approved procedures for having fingerprints taken by an approved vendor.
- I must pay the costs of having my fingerprints taken and the fees for the reports.
- My criminal history record information will be sent directly to the Judicial Branch Certification Commission by the Texas Department of Public Safety.
- My criminal history record information will include information obtained through the Texas Department of Public Safety and the Federal Bureau of Investigation.
- I will provide, if requested to do so by the Judicial Branch Certification Commission, additional documents, records and information relating to my criminal history record information.
- I am responsible for reading the JBCC Rules, adopted by the Supreme Court of Texas and available on the JBCC's website, regarding the consequences of criminal history.
- My application must be complete before it will be considered by the JBCC. A complete application consists of the completed application form, criminal history record information obtained no more than 90 days before the application date, and payment of the appropriate fees.
- I acknowledge it is my responsibility to read, understand, and abide by the Rules and other applicable standards or codes, which are available from the JBCC's website.
- I acknowledge that the fees submitted with this application are non-refundable.
- If my application is approved, I have a continuing obligation to notify the JBCC of any changes to my contact information.
- Submitting false information or omitting any required disclosures may result in denial of my application.

I declare under penalty of perjury that the information provided in this application is true and correct.

Signature of Applicant

Date