STATE	OF INDIANA	IN THE	COUNTY	COURT		
		(County you live in)	(Court staff will	write court type here)		
COUN	TY OF	CASE NUMBER:				
	(County you live in)		(Court staff will write your case n	umber here)		
IN RE	THE MATTER OF:					
(Minor chi	ld's name) R CHILD	-				
	Parent and Other Intereste	ed Person's Waiver of Notice	and Consent to the Appo	intment of		
	<u>G</u>	uardian(s) of the Person of I	Minor Child			
	Instructions: This form tells the	court that the parents and otl	her interested parties do no	t need to be told		
	about any hearing that may be	scheduled, and that they know	w about and consent to the	guardianship.		
	Filer: Give this form to the oth	er person involved in the case	when they agree they know	v about and		
	consent to the guardianship. Once they have completed this form and given it back to you, file this Waive					
	of Notice and Consent form with the court at the same time you file the other documents in this packet.					
	Person Completing this Form: Complete and give this form back to the person who is asking to become the					
	guardian. Please be aware that it may be in your best interest to consult with an attorney before					
	completing this form.					
	Before Filing: Please be aware of the legal outcomes before you complete and file this form. To ensure you					
	are using this form properly and that you understand the legal outcomes of filing this form, please consult					
	the trial rules and your county'	s local rules.				
	Find the trial rules by visiting h	ttps://www.in.gov/courts/rule	es/trial_proc/index.html.			
	Find your county's local rules b	y visiting https://www.in.gov/	courts/publications/local-ru	les/.		
	I swear on my oath that:					
1.	I am an adult and my name is					
2.	•					
3.	My relationship to the minor	child in this case is (state yo	ur relation to the child (i.e	e. father, aunt,		
	guardian, etc.)):					

4. I am aware of the Verified Petition for Appointment of Guardians of the Persons of a Minor Child.

5.	I consent to the appointment of the following as guardian of the minor child (name(s) of petitioners							
	seeking guardianship of minor child):							
6.	I agree to waive service of summons and notices on this Petition.							
	I affirm that under the penalties for perjury that the foregoing representations and statements are true. The following signatures must be signed in front of notary public. Do not complete this until you are with a notary public. Many banks and libraries have a notary public available. A notary public will							
						charge a small fee.		
							Signature:	Date:
	>	Notary Public will complete the section below.						
STATE OF INDIANA								
COUNTY OF								
Before me,		, a notary public in and for						
	County, State of Indiana, personally appeared		and he/she					
	having been first duly sworn upon his/her oath, says that the facts as alleged in the foregoing							
	instrument are true.							
	Date:							
		Notary Public						
	My Commission Expires:							