

CUYAHOGA COUNTY COURT OF COMMON PLEAS DIVISION OF DOMESTIC RELATIONS

GUARDIAN AD LITEM APPLICATION

INSTRUCTIONS: Please read Rules 48 through 48.07 of the Rules of Superintendence for the Courts of Ohio and Local Rule 35 before completing this application.

CONTACT INFORMATION		
Name:	Email Address:	
Office Address:	, Ohio	
Office Telephone Number:	Fax Number:	
Cell Phone #:	Attorney Reg. Number if applicable:	
EDUCATION & TRAINING		
Undergraduate Degree(s):	Major:	
School:	Date:	
Graduate Degree(s):	Date:	
School:		
Please list all foreign languages in which	h you are fluent:	
	cation, or experience in social work, child development, or other related g as guardian ad litem:	
Date Guardian ad Litem Pre-Service Edu	ucation was completed:	
Pre-Service Education Provider Name: _		
	in another county, please provide the date you completed your most Provider Name:	
Estimated number of cases where I hav	e represented litigants in family law cases in the State of Ohio:	

FOR ATTORNEYS ONLY		
iability Insurance Carrier:	Effective Date:	
Are you currently in good standing with the Supreme Court of Ohio?	Yes	No
f no, please explain:		
Have you ever been disciplined or suspended from the practice of law in District of Columbia? Yes No fyes, state the reason and dates of the discipline or suspension:	n Ohio or any	other state, includi

Have you ever been arrested, indicted, or charged with any offense in any action that involved an abused, neglected, or dependent child; a violation of R.C. 2919.25; or any sexually oriented offense? Yes No If yes, please identify the case numbers for each case and explain these charges on a separate attachment.

Have you ever been named as a respondent in an action for a civil protection order or charged with domestic violence in any court? Yes No If yes, please identify the case numbers for each case and explain these charges on a separate attachment.

Has a referral ever been made to any children's services agency alleging that you abused or neglected a child?

Yes

No

If yes, please identify the allegations made in each referral and whether the allegations were substantiated, unsubstantiated, or indicated. State any other findings made on a separate attachment.

Other than as guardian ad litem, are you presently, or have you ever been a party in a civil lawsuit in the past 5 years? Yes No If yes, please identify the court in which you were a party, the case numbers for each case, and a summary of the actions on a separate attachment.

APPOINTMENT INFORMATION		
I am willing to accept appointments regarding Parental Rights and Responsibilities Cases. Yes No		
TES INO		
CERTIFICATION		
I hereby certify that all the above information is accurate and am unaware of any circu disqualify me from serving as guardian ad litem. I am willing to accept appointments as the types of cases as indicated above.		
I have completed the pre-service training and/or continuing education requirements set and 48.05, a statement of which I have provided to the court.	forth in Sup.R. 48.04	
Upon initial application, the court will conduct a criminal and civil background check information relevant to my fitness to serve as guardian ad litem.	and investigation o	
l hereby provide my social security number as follows:	_ to allow the court to	
conduct the background check.		
I understand my obligation to complete at least six hours of continuing education annual Supreme Court of Ohio or approved by this court.	ually provided by the	

Date: _____