



CONSENT TO GUARDIANSHIP OF MINOR AND APPEARANCE

(MINOR GUARDIANSHIP)
IN THE STATE OF ILLINOIS, CIRCUIT COURT

COUNTY: _____
County Where You Are Filing the Case

GUARDIANSHIP OF:

First, Middle, and Last Name of Minor Child

Case Number
(Clerk fills in)

A legal parent, current guardian of a minor, or other adult family members may **use this form to consent (agree)** to the guardianship. This form **must be signed in front of a notary**. A consent is not required and the judge can appoint a guardian even if there is no consent.

If you object (do not agree) to the guardianship, do not fill out this form. You should attend the court date and tell the judge why you object.

1. My name is:

First Name Middle Name Last Name

My Phone Number _____

My Email (if you have one) _____

My Address :

Street, Apt. # City State Zip Code

2. I consent (agree) to the appointment of:

Guardian: _____
Name of Proposed Guardian

Co-Guardian (if there is one): _____
Name of Proposed Guardian

As guardian of the (check one) ☐ person only ☐ estate only ☐ both person and estate.

My relationship to the minor is: _____
Relationship to the Minor (parent, aunt, uncle, sibling, etc.)

3. I enter my appearance in this case.

4. No judge has found me disabled and appointed a Guardian for me.

5. I am completing this form voluntarily, and I understand that I am not required to complete this form.

6. I waive notice of the guardianship hearing:

☐ Yes ☐ No



If Person Above Agrees - Notarized Consent

I _____
First Middle Last

consent to the guardianship.

Only sign in front of a notary:

Signature - Only sign in front of a notary public

Notary Public

State of _____

County of _____

Signed and Sworn to before me on _____ by _____
Month, Day, Year Name

Notary Seal

Signature of Notary