



**Wood County Court of Common Pleas  
Probate Division**

Wood County Courthouse  
Bowling Green, Ohio 43402  
(419) 354-9230

**David E. Woessner**  
Probate Judge

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Volunteer Guardian Application

Applicant Information

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

If you have lived outside of Ohio in the last five years, please list your previous address(es): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Telephone where you would like to be contacted \_\_\_\_\_

E-mail address \_\_\_\_\_

Applicant must be 21 years of age or older: Date of Birth \_\_\_\_\_  
(Note-Birth date needed to complete background check.)

Do you have a valid Ohio Driver's License? \_\_\_\_\_

Have you ever been a party to any civil or criminal legal proceedings? If so, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employment Information

Current Employer \_\_\_\_\_

Employer's Address \_\_\_\_\_

Dates of Employment \_\_\_\_\_

Describe your position/responsibilities. \_\_\_\_\_

Previous Employer \_\_\_\_\_

Employer's Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Previous Employer \_\_\_\_\_

Employer's Address \_\_\_\_\_

Dates of Employment \_\_\_\_\_

Describe your position/responsibilities. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe any volunteer experience you have had. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Education

What is the highest level of education you have completed? \_\_\_\_\_

Name of school \_\_\_\_\_

List any certifications, special skills, foreign languages, or other qualities which would be beneficial to the program. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Professional References: Please list three non-relative references we may contact.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Nature of Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Nature of Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Nature of Relationship \_\_\_\_\_

Why are you interested in being a volunteer guardian? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, \_\_\_\_\_, swear the information provided in this document is true and accurate to the best of my knowledge. I understand this information will be used for the sole purpose of determining my suitability to act as a volunteer guardian. I grant the Wood County Probate Court the permission to contact my listed references, employers, and to complete a law enforcement agency and Bureau of Motor Vehicles background check as part of the selection process for the Volunteer Guardian Program. I also understand it is my responsibility to undergo a BCI records check and provide the results to the Court.

\_\_\_\_\_  
Applicant's Printed Name

\_\_\_\_\_  
Applicant's Signature

Sworn to me and signed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

Notary Seal

\_\_\_\_\_  
Notary Public

My commission expires \_\_\_\_\_

*\*\*Please return completed application to Jennifer Robeson at Wood County Probate Court, One Courthouse Square, Bowling Green, Ohio 43402.\*\**