

# JUDICIAL BRANCH CERTIFICATION COMMISSION

Office of Court Administration



## GUARDIANSHIP REGISTRATION FORM

Please Type or Print Legibly. Please complete form in its entirety.

**FOR CO-GUARDIANSHIP, EACH GUARDIAN SHOULD COMPLETE THEIR OWN REGISTRATION FORM**

Registration forms can be submitted to one of the following:

1. PO Box 12066, Austin, TX 78711-2066
2. Fax to 512.463.1117
3. Emailed to: [jbccguardianregistration@txcourts.gov](mailto:jbccguardianregistration@txcourts.gov)

**EXISTING OR PROPOSED GUARDIAN INFORMATION (ONE PERSON PER FORM):**

Last name: \_\_\_\_\_

First name: \_\_\_\_\_

Middle name: \_\_\_\_\_

Date of birth of guardian / proposed guardian: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Physical address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Primary phone number with area code: \_\_\_\_\_

Alternate phone number (if different than primary phone number): \_\_\_\_\_

Primary email address: \_\_\_\_\_

Alternate email (if different than primary email address): \_\_\_\_\_

Any and all former names used by the guardian / proposed guardian:  
\_\_\_\_\_

Were you appointed as guardian prior to June 1, 2018?     YES             NO

If not Texas, in which state were you appointed? \_\_\_\_\_

Is this a temporary guardianship?     YES             NO

Case, cause or docket number: \_\_\_\_\_

Qualification date\*: \_\_\_\_\_

\*This is the date the oath was signed and/or the bond was paid, whichever is later. This can be found on your Letter of Guardianship. You will not have a qualification date until the Court appoints you, the oath is signed and/or a bond (if any) is paid. If you do not have a qualification date (i.e. you have not been appointed by the Court yet) at the time of this registration, please let us know the date as soon as possible after your appointment.

**INFORMATION REQUESTED BELOW CAN BE FOUND ON YOUR ORIGINAL LETTER OF GUARDIANSHIP GIVEN WHEN YOU WERE AWARDED THE GUARDIANSHIP.**

Guardianship type (Check ONLY one):     Of the Person     Of the Estate     Both

Estate total liquid assets\* of the Ward: \$ \_\_\_\_\_

\*Liquid assets are assets that are or can be easily converted to cash in one day.

Name of the county with jurisdiction over the guardianship: \_\_\_\_\_

Name of the Court with jurisdiction over the guardianship: \_\_\_\_\_

Type of guardian (Check ONLY one):     Family Member     Friend     Attorney  
                                                           Certified\*         HHSC         Corporate Fiduciary  
                                                           Program

Program name: \_\_\_\_\_

\*A Certified Guardian is a person who is certified by the Commission to provide guardianship services in the State after having met all eligibility requirements.

Current Judge’s name\* where the guardianship is filed: \_\_\_\_\_

\*The Clerk is not the same as the Judge. If you have questions on who the Judge is, please contact the county clerk’s office that has jurisdiction over the guardianship.

**PROTECTED PERSON’S, ALSO KNOWN AS THE WARD’S, INFORMATION**

Last name: \_\_\_\_\_

First name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Gender:  Male     Female

Case type: The ward is a: (Check ONLY one):  Adult     Minor     Minor becoming an adult

**ATTORNEY INFORMATION – If you do not have an attorney, please indicate with “none”**

Last name: \_\_\_\_\_

First name: \_\_\_\_\_

Bar Number: \_\_\_\_\_

**PROTECTED PERSON’S, (ALSO KNOWN AS THE WARD’S), CONTACT INFORMATION**

Physical address (where the Ward is physically located): \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Phone number (if any): \_\_\_\_\_

Email address (if any): \_\_\_\_\_

**ATTORNEY CONTACT INFORMATION:**

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Primary phone with area code: \_\_\_\_\_

Alternate phone number (different than primary phone number): \_\_\_\_\_

Fax number: \_\_\_\_\_

Primary email address: \_\_\_\_\_

Alternate email address (if different than primary email): \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION FOR THE GUARDIAN / PROPOSED GUARDIAN:**

Last name: \_\_\_\_\_

First name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone number: \_\_\_\_\_

**QUESTIONS:**

1. 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? If Yes, please provide dates and explanation of circumstances.

YES  NO

If yes, please provide an explanation:

2. Has your authority to be a guardian ever been terminated, vacated, or sanctioned in Texas or any other jurisdiction by a court, regulatory authority, or other governmental entity? If Yes, please provide dates and explanation of circumstances.

YES  NO

If yes, please provide an explanation:

3. Have you ever been found civilly liable or settled a claim in an action, included 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? If Yes, please provide dates and explanation of circumstances.

YES  NO

If yes, please provide an explanation:

**As part of the registration process, I understand and agree to the information below:**

- Guardianships that existed before June 1, 2018 are not required to complete the guardianship training nor are they required to undergo a criminal history background check unless ordered to do so by the court.
- A name and date of birth criminal history background check will be performed by the JBCC if the liquid estate value of the guardianship (whether of the person or of the estate) is less than \$50,000.
- There will be a check of my criminal history records. If the value of the liquid assets of the estate is \$50,000 or more, I will submit my fingerprints in accordance with directions from the JBCC. It is my responsibility to timely initiate the criminal history background check. I will pay the cost of running the check on my fingerprints and the fee for criminal history reports. I must submit a copy of my fingerprinting receipt to the JBCC at [jbccguardianregistration@txcourts.gov](mailto:jbccguardianregistration@txcourts.gov). The JBCC is not notified when I am fingerprinted, so I will need to provide the receipt.
- I must submit complete information on the registration form for the JBCC to process the registration.
- After completing and submitting the registration information, I must also complete the Guardian Training Module available on the Guardianship Registration page of the JBCC website – [www.txcourts.gov/jbcc/register-guardianship](http://www.txcourts.gov/jbcc/register-guardianship).
- If I am appointed and qualify as guardian, I have a continuing obligation to notify the JBCC of any changes to registration information not later than 30 days after the change.
- Submitting false information or omitting any required disclosures may result in denial of my registration.
- If I have any questions, I submit them to [jbccguardianregistration@txcourts.gov](mailto:jbccguardianregistration@txcourts.gov).
- The JBCC does not approve or deny registrations for appointment as guardian. The JBCC conveys information from this form, criminal history record data, and confirmation of guardian training to the court with jurisdiction over the guardianship. It is the court, not the JBCC, that decides whether to approve my registration for appointment as guardian.

I declare under penalty of perjury that I have authority to sign this registration form and that the information provided in this registration form is true and correct.

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Signature of Guardian/ Proposed Guardian

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Date