

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS
COUNTY DEPARTMENT, PROBATE DIVISION

Estate of

A Minor

No. _____

PROPOSED APPOINTED GUARDIAN CHECKLIST

Full Name & Middle Initial of Proposed Guardian: _____

Gender: [] Male [] Female

Year of Birth _____

Place of Birth _____

Last 4 digits of Social Security No: _____

Last 4 digits of Driver License OR State I.D. No: _____

Address: _____

City/State/Zip code: _____

Return Date: _____

[] Pursuant to Illinois Supreme Court Rule 138, I have filed under seal, a Notice of Personal Identity Information Within Court Filing form (CCG 0502) containing the entire date of birth, Social Security Number, and Driver's License Number.

Return Date: _____

CONSENT FOR CANTS BACKGROUND CHECK

As requested by this Honorable Court, the undersigned proposed guardian(s), hereby give consent to the Illinois Department of Children and Family Services to Conduct a Child Abuse and Neglect Tracking System (CANTS) check. The purpose of this check is to determine if I or we, as the proposed guardian(s), have caused or substantially contributed to this minor, becoming an abused or neglected minor, as defined in the Juvenile court Act of 1987 at any time in the past.

PROPOSED GUARDIAN(S)

Name: _____
(Please Print)

Year of Birth: _____

Address: _____

City/State/Zip Code: _____

Date: _____

Signature: _____
(Proposed Guardian)

Witness: _____

Name: _____
(Please Print)

Year of Birth: _____

Address: _____

City/State/Zip Code: _____

Date: _____

Signature: _____
(Proposed Guardian)

Witness: _____

[] Pursuant to Illinois Supreme Court Rule 138, I have filed under seal, a Notice of Personal Identity Information Within Court Filing Form (CCG 0502), containing the entire date of birth, Social Security Number, and Driver License Number.

Date: _____

Signature: _____
(Proposed Guardian)

Witness: _____

FOR DCFS USE ONLY

Probate Case No: _____

Return Date: _____

Time: _____