

**IN THE CHANCERY COURT OF THE _____ JUDICIAL DISTRICT
OF HINDS COUNTY, MISSISSIPPI**

**IN THE MATTER OF THE
GUARDIANSHIP OF**

CAUSE NO. _____

_____,
A MINOR

BY PETITIONER(S):

OATH OF OFFICE OF GUARDIAN OF A MINOR

I, _____, hereby state that I accept the office of the Guardian of the Minor named above, and will fulfill the duties and responsibilities of the office as required by law as set forth in the Mississippi Guardianship and Conservatorship Act.

INITIAL EACH I have a duty to:

_____ Become personally acquainted with the minor and maintain sufficient contact with the minor to know and report to the court the minor's abilities, limitations, needs, opportunities, and physical and mental health

_____ Take reasonable care of the minor's personal effects and bring a proceeding for a conservatorship if necessary to protect other property of the minor

_____ Expend funds of the minor that have been received by the guardian for the minor's current needs for support, care, education, health, safety, and welfare (as limited below)

_____ Conserve any funds of the minor not expended for the minor's future needs, but if a conservator is appointed for the minor, pay the funds as directed by the court to the conservator to be conserved for the minor's future needs

_____ Report the condition of the minor and account for funds and other property of the minor in the guardian's possession or subject to the guardian's control, as required by court rule or ordered by the court on application of a person interested in the minor's welfare. First report due: _____

_____ Inform the court of any change in the minor's dwelling or address; and (g) In determining what is in the minor's best interest, take into account the minor's preferences to the extent actually known or reasonably ascertainable by the guardian.

INITIAL EACH IF MARKED: I am empowered with the powers enumerated in Section 209, with the following exception(s):

_____ [] Apply for and receive funds up to the amount set forth in Section 431 (\$25,000.00) and benefits otherwise payable for the support of the minor to the minor's parent, guardian, or custodian under a statutory system of benefits or insurance or any private contract, devise, trust, conservatorship, or custodianship. (A mark in this box means that the Guardian must immediately report any income by the minor from any source to the Court and may not dispose, disburse, or spend said funds without further Court Order.)

_____ [] Other exception: _____

I am bound to the People of the State of Mississippi to faithfully discharge the duties of this office.

GUARDIAN

Prepared by:

Name: _____

Address: _____

City: _____ State _____ Phone: _____

Zip: _____ Email address: _____

ATTESTATION

STATE OF MISSISSIPPI COUNTY OF _____

Personally appeared before me, the undersigned authority, in and for the aforesaid jurisdiction, _____, who having been by me first duly sworn stated on his/her oath that the matters and things stated in the above foregoing instrument are true and correct as therein stated.

SWORN TO AND SUBSCRIBED before me this the ____ day of _____, 20 ____.

NOTARY PUBLIC

My Commission Expires: _____