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STATE OF NEW YORK
SURROGATE'S COURT : COUNTY OF



Proceeding for the Appointment of a
Guardian for

Pursuant to SCPA Article 17-A



**CONSENT, OATH
AND DESIGNATION**

STATE OF NEW YORK)
COUNTY OF) ss.:



_____, being duly sworn, deposes and says:



① I am a competent person and I do hereby consent to the relief requested in the petition and my appointment as Standby Guardian First Alternate Standby Guardian Second Alternate Standby Guardian of Ward's Person Property Person & Property Limited Guardian of Property; and I waive the issuance and service of process upon me herein.



② I will make an application for confirmation in accordance with SCPA §1757 and will be subject to a formal hearing if Ward is eighteen (18) years of age or over.



③ I agree that upon the death, incapacity, renunciation or removal of the last Guardian who was designated to serve before me that I will immediately assume the duties of Guardian of Ward's Person Property Person & Property Limited Guardian of Property; and will seek to have this Court confirm my appointment within one hundred eighty (180) days of my assumption of duties.



④ Oath of Standby Guardian First Alternate Standby Guardian Second Alternate Standby Guardian.
I am over eighteen (18) years of age and a citizen of the United States. I will faithfully and honestly discharge the duties of Standby Guardian First Alternate Standby Guardian Second Alternate Standby Guardian of Ward's Person Property Person & Property Limited Guardian of Property. I am acquainted with the Ward; and I am eligible to receive letters.



⑤ Designation of Clerk for Service of Process.
I do hereby designate the Clerk of the Surrogate's Court of _____ County, and his/her successor in office as a person on whom service of any process issuing from such Surrogate's Court may be made, in like manner and with like effect as if it were served personally upon me whenever I cannot be found and served within the State of New York after due diligence used.

My permanent address is: _____, _____, _____, _____
Street City State Zip



Signature

Print name

STATE OF NEW YORK)
) ss.:
COUNTY OF _____)



On _____, 20___, before me personally came _____,
to me known to be the person described in and who executed the foregoing instrument. Such
person duly swore to such instrument before me and duly acknowledged that he/she executed
the same.

Notary Public