

**ACCEPTANCE OF
APPOINTMENT OF
TEMPORARY GUARDIAN
FOR A MINOR**

IN THE COUNTY COURT OF _____ COUNTY, NEBRASKA

IN THE MATTER OF

Case No. _____

Ward

**ACCEPTANCE OF APPOINTMENT
OF TEMPORARY GUARDIAN FOR
A MINOR**

I, _____, accept appointment as temporary guardian of
(name of guardian(s))

_____, a minor, and swear that I will perform, according to law,
(name of ward)

all duties for the ward as temporary guardian.

Signature(s) of Guardian(s)

Date _____

Print or Type Name of Guardian(s)

Bar Number and Firm Name (attorneys only)

Street Address/P.O. Box of Guardian(s)

City/State/ZIP Code of Guardian(s)

Phone of Guardian(s)

E-mail Address of Guardian(s)