



WASHOE COUNTY SCHOOL DISTRICT

Appointment of Temporary Guardian by a Parent (NRS 159.205)

Complete One Form Per Child

I, _____, a parent of _____, a minor child, whose date of birth is _____, hereby desires to appoint _____ and _____ as temporary short-term legal guardian(s) of said minor child pursuant to NRS 159.205.

Eligibility: Please read the following (3) questions and check the answer where applicable.

Question 1:

Does the minor child have another parent who is living? ☐ Yes ☐ No

If the answer to Question No. 1 is no, then skip all further questions and go immediately to the signature line on the bottom of page 1 of this form and sign in the presence of a notary public.

Question 2:

Does the other parent consent to the appointment of a temporary legal guardian of the minor child? ☐ Yes ☐ No

If the answer to Question No. 2 is yes, then skip all further questions and both parent's notarized signatures are required on the bottom of page 1 and on the top of page 2.

Question 3:

Have the rights of the other parent been terminated? ☐ Yes ☐ No

If the answer to Question No. 3 is yes, then skip all further questions and go immediately to the signature line on the bottom of page 1 of this form and sign in the presence of a notary public.

If the answer to Question 3 is no, please answer the following questions:

A. Do you know the whereabouts of the other parent? ☐ Yes ☐ No

B. Is the other parent willing and able to make and carry out daily child care decisions instead of the parent notarizing the temporary guardianship form? ☐ Yes ☐ No

If the answers to question **A. and B. are both yes, then you may not appoint a short-term guardian for this minor child pursuant to NRS. 159.205.**

NOTARY NOTICE

STATE OF _____)

COUNTY OF _____)

On _____, personally appeared before me, a notary public, _____, who is the other parent of the minor child identified above and who consents to the appointment of the person(s) identified in this instrument as temporary short-term guardian pursuant to NRS 159.205.

Notary Public

(SEAL)

Signature of Parent/Applicant:

I hereby declare under penalty that I am the parent who has legal custody of the minor child identified above and that the answers, initials and absence of initials on this form are true and correct.

Signature of Parent

NOTARY NOTICE

STATE OF _____)

) ss.

COUNTY OF _____)

On _____, personally appeared before me, a notary public, _____, who acknowledged to me that he/she has read and understood the within instrument and desires that the person(s) identified in this instrument accepts the appointment as temporary legal guardian of the minor child pursuant to NRS 159.205.

Notary Public

(SEAL)

Signature of Parent/Applicant:

I hereby declare under penalty that I am the parent who has legal custody of the minor child identified above and that the answers, initials and absence of initials on this form are true and correct.

Signature of Parent**Consent of Minor Child:**

If the minor child is fourteen (14) years of age or older, the minor child's written consent to the temporary short-term guardianship is required.

Signature of minor child: _____

DOB:

DATE:

Acceptance of Appointment of Guardianship:

I/We _____ and _____, do hereby accept this appointment as temporary short-term guardian for the minor child identified in this instrument and will accept responsibility for the care, custody, and control of said minor child, including all necessary authority and power to furnish and provide care and services to said minor child as may seem necessary, proper, or desirable in the child's best interest and welfare, including but not limited to food, clothing, shelter, education, and medical-surgical-dental care and treatment. I/We agree to abide by all federal, state and local laws including rules and regulations of the Washoe County School District. I/We understand this guardianship shall become effective upon my/our execution of this document in the presence of a notary public for a period of six (6) months and may be terminated by an instrument in writing signed by either parent of the minor child if that parent has not been deprived of the legal custody of said minor, or by any order of a court of competent jurisdiction. My/Our address and phone number are as follows:

Address:

Signature of Guardian

Phone No.

Signature of Guardian**NOTARY NOTICE**STATE OF _____)
_____) ss:

COUNTY OF _____)

On _____, personally appeared before me, a notary public, _____, and _____, who hereby accepted the appointment as temporary short-term guardian of the minor child identified above pursuant to NRS 159.205 beginning on this date.

Notary Public

(SEAL)

Note: Please be aware that under NIAA policy (NAC 386.784.782 subsec.5) any student who transfers to another school is presumed ineligible to participate in any sanctioned sport at the school to which he transfers for 180 school days. Additionally, the NIAA will not recognize a temporary guardianship that is granted without the approval of a court pursuant to NRS 159.205 or 159.215.