

ILLINOIS STATUTORY SHORT FORM APPOINTMENT OF SHORT-TERM GUARDIAN

1. **Parents and Child.** I, _____, currently residing at _____

_____ am a parent of the following child:

Name: _____

Birthdate: _____

2. **Guardian.** We hereby appoint the following person as the short-term guardian for the child:

3. **Effective Date.** This appointment becomes effective on _____, 20__.

4. **Termination.** This appointment shall terminate ___ days after the effective date or, if earlier, on the date that either parent specifies in writing that this appointment is terminated.

5. **Signature of Appointing Parent.**

This appointment is made this day of _____, 20__

Signed: _____
Appointing Parent

6. **Witnesses.** I saw the parents of the child sign this instrument. Then I signed this instrument as a witness in the presence of the parents. I am not appointed in this instrument to act as the short-term guardian for the child.

Witnesses:

Name: _____

Address: _____

Name: _____

Address: _____

7. **Acceptance of Short-Term Guardian.** I accept this appointment as short-term guardian.

On this _____ day of _____, 20__

Signed: _____

8. **Consent of Child's Other Parent.** I _____, currently

residing at _____

_____, hereby consent to this appointment.

On this _____ day of _____, 20__

Signed: _____
Consenting Parent