



North Carolina Guardianship Association

Post Office Box 17673
(919) 782-4632

Raleigh, North Carolina 27619
(800) 662-8706 - Toll Free

APPLICATION FOR REGISTERED GUARDIAN RE-CERTIFICATION

(must be completed and notarized)

1. Full Name: _____
(As you wish it to appear on your certificate)

2. Are you a NCGA member? Yes No

3. Business/Agency Name (if applicable): _____

4. Mailing Address: _____

City: _____ State: _____ Zip Code: _____

5. Daytime Telephone Number: _____ Fax Number: _____

6. Evening Telephone Number: _____

7. E-mail Address: _____

8. List your experience providing guardianship or other alternative protective service of person or estate for the last 2 years, beginning with the most recent.

Employer Name/Address	Position	Dates begin and end
_____	_____	_____
_____	_____	_____
_____	_____	_____

9. Guardianship Education and Related Courses

On a separate piece of paper please provide with dates, speaker bureaus or presentations, courses taken, program sponsors, locations and the number of hours completed for each course with appropriate documentation .

10. Have you ever been removed for cause as guardian or fiduciary? Yes No
If yes, attach a letter of explanation.

11. Have you ever been convicted or pleaded guilty or no contest to a misdemeanor or felony? Yes No
If yes, please indicate the offense along with the name and location of the court before which you appeared and the dispositions of the case. _____

12. Have you ever been found civilly or criminally liable for an action of fraud, misrepresentation, material omission, misappropriation, theft, or conversion? Yes No
If yes, please explain. _____

I certify that the information provided in this application is true and correct to the best of my knowledge and belief.

(Must be signed before a Notary Public.)

_____ Date _____ Signature of Applicant

State of _____ County of _____

The forgoing instrument was acknowledged before me this _____ day of _____
200__, by _____ who is personally known to me or who has
produced _____ as identification.

Notary Public

Return Application to:
North Carolina Guardianship Association
PO Box 17673
Raleigh, North Carolina 27619-7673
919-782-4632
800-662-8706 toll free
919-782-4482 fax