



# North Carolina Guardianship Association

Post Office Box 17673  
Phone: (919) 266-9204  
Email: ncguardian@aol.com

Raleigh, North Carolina 27619  
Fax: (919) 266-9207  
Website: nc-guardian.org

## APPLICATION FOR RE-CERTIFICATION (Must be completed and notarized)

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

2. Are you a member of the North Carolina Guardianship Association? Yes \_\_\_\_\_ No \_\_\_\_\_

3. Business/Agency Name (if applicable): \_\_\_\_\_

4. Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

5. Daytime Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

6. Evening Telephone Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

7. Education: (Please list any additional education since last certification)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. List your experience providing guardianship or other related work and/or volunteer experience for the last 2 years, beginning with the most recent.  
List work related experience:  
\_\_\_\_\_  
\_\_\_\_\_

List volunteer experience:  
\_\_\_\_\_  
\_\_\_\_\_

List experience serving family member or friend with special needs:  
\_\_\_\_\_  
\_\_\_\_\_

9. Guardianship Education and Related Courses (Please attach a listing of dates, courses taken, program sponsors, locations and the number of hours completed for each course with appropriate documentation. You must have a minimum of 20 hours of education and related courses during the 2 year period for recertification.)

10. Are you currently serving as a court appointed guardian? If yes, please attach a copy of your Letters of Appointment.

11. If you are a court appointed Guardian of the Estate or General Guardian, please attach documentation with the name, address and telephone number of the surety company holding your bond.

11. If you are a court appointed Guardian of the Estate or General Guardian, please attach documentation with the name, address and telephone number of the surety company holding your bond.

12. Have you ever been found liable in a subrogation action by an insurance or bonding agent? Yes\_\_\_ No\_\_\_  
If yes, please attach a letter of explanation.

13. Have you ever been convicted or pleaded guilty or no contest to a misdemeanor or felony? Yes\_\_\_ No\_\_\_

14. Have you ever been removed for cause as guardian or fiduciary by a court, employer, or client for actions involving fraud, misrepresentation, material omission, misappropriation, theft, or conversion?

Yes\_\_\_ No\_\_\_ If yes, please attach a letter of explanation.

15. Have you ever been found civilly or criminally liable for an action of fraud, moral turpitude, misrepresentation, material omission, misappropriation, theft, or conversion? Yes\_\_\_ No\_\_\_

If yes, please explain \_\_\_\_\_  
\_\_\_\_\_

16. Do you have special needs requiring NCGA attention? Yes\_\_\_ No\_\_\_

If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_

I swear or affirm that the information provided in this application is true and correct to the best of my knowledge and belief.  
(Application must be signed before a Notary Public.)

\_\_\_\_\_  
Signature of Applicant Date

State of \_\_\_\_\_ County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_

20 \_\_\_\_, by \_\_\_\_\_ who is personally known to me or who has produced  
\_\_\_\_\_ as identification.

\_\_\_\_\_  
Notary Public My Commission expires on \_\_\_\_\_

**Return Application to:**  
North Carolina Guardianship Association  
PO Box 17673  
Raleigh, North Carolina 27619-7673  
Phone 919-266-9204  
Fax 919-266-9207