

Temporary Guardian/Custodian of Minor(s)

I/WE....., of

[NAME]

[ADDRESS]

....., of

[NAME]

[ADDRESS]

Am/are the natural and legal parent(s) of the following minor child(ren):

Name: Date of Birth:.....[mm/dd/yyyy]

Name: Date of Birth:.....[mm/dd/yyyy]

Name: Date of Birth:.....[mm/dd/yyyy]

Name: Date of Birth:.....[mm/dd/yyyy]

After considering the best interests of the child(ren) referred to above, I/WE appoint

....., of

[name]

[address]

to stand *in loco parentis*, and be the guardian/custodian of my/our child(ren).

This appointment takes effect on my/our absence from this city, state, and/or country. When I/WE are facing a deportation hearing, or have been deported from the United States **then this appointment takes effect and this document provides evidence of my/our specific intent to provide supervision and care for the child(ren).**

As a result of this deportation/exclusion from the United States, if I/WE are unable to care for the child(ren), then I/WE direct the appointed guardian/custodian to make any and all reasonable efforts to contact me/us in my/our country of origin or wherever I/WE am deported to, and consult with me/us to the fullest possible extent regarding the care and upbringing of the child(ren).

On this appointment taking effect, the appointed guardian/custodian has the same parental responsibilities that I/WE currently have which includes, but is not limited to:

The legal custody and primary physical custody of the Child(ren).

“**legal custody**” means the right to make major decisions on behalf of the child, including, but not limited to, medical, religious and educational decisions;

“**primary physical custody**” means the right to assume physical custody of the child for the majority of time.

There is/is not (circle one) a custody order in effect in the County of

State/Commonwealth of

[if there is an order, attach a copy of the order]

Date: [mmm/dd/yyyy] Signature of parent(s):.....

Date: [mmm/dd/yyyy] Signature of parent(s):.....

This appointment was signed in the presence of WITNESSES [The witnesses to this appointment must be at least 19 years of age and must not be the person appointed as guardian.]

Witness #1 Name (Printed/Typed):

Witness Address:

Signature of Witness:.....

Witness #2 Name (Printed/Typed):

Witness Address:

Signature of Witness:.....

Certificate of Acknowledgement

Commonwealth of Pennsylvania
County of _____

On _____, before me, _____,
(date) (notary)

personally appeared,

_____, _____,
_____, _____ (signers)

Proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal
