



Lake County
Court of Common Pleas
Juvenile Division

Judge Karen Lawson

Filing Procedure:

**Grandparent Caregiver Power of Attorney &
Grandparent Caregiver Authorization Affidavit**

1. The Power of Attorney form is to be used in consensual situations, where the parent(s) is/are empowering the grandparent caregiver to care for their child. The form must be signed by the parent(s) and grandparent caregiver, and **notarized no more than five (5) days before filing. The nonresidential/custodial parent must be notified of the creation of the Power of Attorney. The parent creating the power of attorney must send by certified mail a copy to the parent who is not the residential parent and legal custodian. Proof of notification must be filed with the power of attorney.**
2. The Caregiver Authorization Affidavit form is to be used when the child resides with the grandparent, but despite reasonable efforts, the parent(s) is/are unable to be located. The form must be signed by the grandparent caregiver, and **notarized no more than five (5) days before filing.**
3. The Power of Attorney and Caregiver Authorization Affidavit allow the grandparent caregiver to enroll the grandchild in school, participate in their education, and to obtain routine and emergency medical, psychological, and dental care. **The Power of Attorney and Caregiver Authorization Affidavit do not transfer legal custody to the grandparent caregiver.**
4. An **Affidavit Regarding Custody** must accompany the Power of Attorney and Caretaker Authorization Affidavit at the time of filing.
5. See the “Additional Information” sections contained with the Power of Attorney and Caregiver Authorization affidavits for further instruction including information on how/when termination occurs.

See www.PCSAO.org and the Ohio Revised Code for additional information.

CAREGIVER AFF packet

GRANDPARENT CARETAKER AUTHORIZATION AFFIDAVIT

Use of this affidavit is authorized by sections [3109.65](#) to [3109.73](#) of the Ohio Revised Code.

Completion of items 1-7 and the signing and notarization of this affidavit is sufficient to authorize the grandparent signing to exercise care, physical custody, and control of the child who is its subject, including authority to enroll the child in school, to discuss with the school district the child's educational progress, to consent to all school-related matters regarding the child, and to consent to medical, psychological, or dental treatment for the child.

The child named below lives in my home, I am 18 years of age or older, and I am the child's grandparent.

1. Name of child: _____

2. Child's date and year of birth: _____

3. Child's social security number (optional): _____

4. My name: _____

5. My home address: _____

6. My date and year of birth: _____

7. My Ohio driver's license number or identification card number: _____

8. Despite having made reasonable attempts, I am either:

(a) Unable to locate or contact the child's parents, or the child's guardian or custodian; or

(b) I am unable to locate or contact one of the child's parents and I am not required to contact the other parent because paternity has not been established; or

(c) I am unable to locate or contact one of the child's parents and I am not required to contact the other parent because there is a custody order regarding the child and one of the following is the case:

(i) The parent has been prohibited from receiving notice of a relocation; or

(ii) The parental rights of the parent have been terminated.

9. I hereby certify that this affidavit is not being executed for the purpose of enrolling the child in a school or school district so that the child may participate in the academic or interscholastic athletic programs provided by that school or district.

I understand that this document does not authorize a child support enforcement agency to redirect child support payments. I further understand that to have an existing child support order modified or a new child support order issued administrative or judicial proceedings must be initiated.

WARNING: DO NOT SIGN THIS FORM IF ANY OF THE ABOVE STATEMENTS ARE INCORRECT. FALSIFICATION IS A CRIME UNDER SECTION [2921.13](#) OF THE REVISED CODE, PUNISHABLE BY THE SANCTIONS UNDER CHAPTER 2929. OF THE REVISED CODE, INCLUDING A TERM OF IMPRISONMENT OF UP TO 6 MONTHS, A FINE OF UP TO \$1,000, OR BOTH.

I declare that the foregoing is true and correct:

Signed: _____ Date: _____
Grandparent

State of Ohio)
) ss:
County of _____)

Subscribed, sworn to, and acknowledged before me this _____ day of _____, 20_____

Notary Public

Notices:

1. The grandparent's signature must be notarized by an Ohio notary public.
2. The grandparent who executed this affidavit must file it with the juvenile court of the county in which the grandparent resides or any other court that has jurisdiction over the child under a previously filed motion or proceeding not later than five days after the date it is executed.
3. This affidavit does not affect the rights of the child's parents, guardian, or custodian regarding the care, physical custody, and control of the child, and does not give the grandparent legal custody of the child.
4. A person or entity that relies on this affidavit, in good faith, has no obligation to make any further inquiry or investigation.
5. This affidavit terminates on the occurrence of whichever of the following occurs first: (1) the child ceases to live with the grandparent who signs this form; (2) the parent, guardian, or custodian of the child acts to negate, reverse, or otherwise disapprove an action or decision of the grandparent who signed this affidavit, and the grandparent either voluntarily returns the child to the physical custody of the parent, guardian, or custodian or fails to file a complaint to seek custody within fourteen days; (3) the affidavit is terminated by court order; (4) the death of the child who is the subject of the affidavit; or (5) the death of the grandparent who executed the affidavit.
6. A parent, guardian, or custodian may negate, reverse, or disapprove a grandparent's action or decision only by delivering written notice of negation, reversal, or disapproval to the grandparent and the person acting on the grandparent's action or decision in reliance on this affidavit.

If this affidavit terminates other than by the death of the grandparent, the grandparent who signed this affidavit shall notify, in writing, all of the following:

- (a) Any schools, health care providers, or health insurance coverage provider with which the child has been involved through the grandparent;
- (b) Any other person or entity that has an ongoing relationship with the child or grandparent such that the person or entity would reasonably rely on the affidavit unless notified of the termination;
- (c) The court in which the affidavit was filed after its creation.

The grandparent shall make the notifications not later than one week after the date the affidavit terminates.

7. The decision of a grandparent to consent to or to refuse medical treatment or school enrollment for a child is superseded by a contrary decision of a parent, custodian, or guardian of the child, unless the decision of the parent, guardian, or custodian would jeopardize the life, health, or safety of the child.

Additional information:

To caretakers:

1. If the child stops living with you, you are required to notify, in writing, any school, health care provider, or health care insurance provider to which you have given this affidavit. You are also required to notify, in writing, any other person or entity that has an ongoing relationship with you or the child such that the person or entity would reasonably rely on the affidavit unless notified. The notifications must be made not later than one week after the child stops living with you.
2. If you do not have the information requested in item 7 (Ohio driver's license or identification card), provide another form of identification such as your social security number or medicaid number.
3. You must include with the caretaker authorization affidavit the following information:
 - (a) The child's present address, the addresses of the places where the child has lived within the last five years, and the name and present address of each person with whom the child has lived during that period;
 - (b) Whether you have participated as a party, a witness, or in any other capacity in any other litigation, in this state or any other state, that concerned the allocation, between the parents of the same child, of parental rights and responsibilities for the care of the child and the designation of the residential parent and legal custodian of the child or that otherwise concerned the custody of the same child;
 - (c) Whether you have information of any parenting proceeding concerning the child pending in a court of this or any other state;
 - (d) Whether you know of any person who has physical custody of the child or claims to be a parent of the child who is designated the residential parent and legal custodian of the child or to have parenting time rights with respect to the child or to be a person other than a parent of the child who has custody or visitation rights with respect to the child;
 - (e) Whether you previously have been convicted of or pleaded guilty to any criminal offense involving any act that resulted in a child's being an abused child or a neglected child or previously have been determined, in a case in which a child has been adjudicated an abused child or a neglected child, to be the perpetrator of the abusive or neglectful act that was the basis of the adjudication.
4. If the child's parent, guardian, or custodian acts to terminate the caretaker authorization affidavit by delivering a written notice of negation, reversal, or disapproval of an action or decision of yours or removes the child from your home and if you believe that the termination or removal is not in the best interest of the child, you may, within fourteen days, file a complaint in the juvenile court to seek custody. You may retain physical custody of the child until the fourteen-day period elapses or, if you file a complaint, until the court orders otherwise.

To school officials:

1. This affidavit, properly completed and notarized, authorizes the child in question to attend school in the district in which the grandparent who signed this affidavit resides and the grandparent is authorized to provide consent in all school-related matters and to discuss with the

school district the child's educational progress. This affidavit does not preclude the parent, guardian, or custodian of the child from having access to all school records pertinent to the child.

2. The school district may require additional reasonable evidence that the grandparent lives at the address provided in item 5 of the affidavit.

3. A school district or school official that reasonably and in good faith relies on this affidavit has no obligation to make any further inquiry or investigation.

4. The act of a parent, guardian, or custodian of the child to negate, reverse, or otherwise disapprove an action or decision of the grandparent who signed this affidavit constitutes termination of this affidavit. A parent, guardian, or custodian may negate, reverse, or disapprove a grandparent's action or decision only by delivering written notice of negation, reversal, or disapproval to the grandparent and the person acting on the grandparent's action or decision in reliance on this affidavit.

To health care providers:

1. A person or entity that acts in good faith reliance on a CARETAKER AUTHORIZATION AFFIDAVIT to provide medical, psychological, or dental treatment, without actual knowledge of facts contrary to those stated in the affidavit, is not subject to criminal liability or to civil liability to any person or entity, and is not subject to professional disciplinary action, solely for such reliance if the applicable portions of the form are completed and the grandparent's signature is notarized.

2. The decision of a grandparent, based on a CARETAKER AUTHORIZATION AFFIDAVIT, shall be honored by a health care facility or practitioner, school district, or school official unless the health care facility or practitioner or educational facility or official has actual knowledge that a parent, guardian, or custodian of a child has made a contravening decision to consent to or to refuse medical treatment for the child.

3. The act of a parent, guardian, or custodian of the child to negate, reverse, or otherwise disapprove an action or decision of the grandparent who signed this affidavit constitutes termination of this affidavit. A parent, guardian, or custodian may negate, reverse, or disapprove a grandparent's action or decision only by delivering written notice of negation, reversal, or disapproval to the grandparent and the person acting on the grandparent's action or decision in reliance on this affidavit.

**IN THE COURT OF COMMON PLEAS
JUVENILE DIVISION
LAKE COUNTY, OHIO**

CASE NO. _____

Plaintiff/Petitioner

vs.

**JUDGE KAREN LAWSON
AFFIDAVIT REGARDING CUSTODY**

Defendant/Petitioner

INSTRUCTIONS

If you need more space to answer any question, please attach a separate sheet of paper to the back of this form. If the answers to the following questions are not the same for all children, a separate affidavit must be filed for each child.

STATE OF OHIO)

) SS:

COUNTY OF LAKE)

I, the undersigned, being first duly sworn, state the following answers to the questions in this AFFIDAVIT are true. I understand that I have a continuing duty to inform the Court of any parenting proceedings concerning the child/children in this or any other state of which I obtain information during this proceeding. The names and dates of birth of the child/children for which this affidavit applies is/are:

1. Beginning with the child(ren)'s present address, state the places where the child(ren) lived within the past five years, and the names and present addresses of the persons with whom the child(ren) lived during that period.

PART A

Places and Dates

Living with: _____

Address: _____

From _____ To _____

Living with: _____

Address: _____

From _____ To _____

Living with: _____

PART B

Provide the present address for each person listed in PART A

Mother's address: _____

Father's Address: _____

Other: _____

Other: _____

Other: _____

Address: _____
From _____ To _____ Other: _____

2. Have you participated as a party, witness, or in any other capacity, in any other litigation concerning the custody and/or parenting time of the same child/children, or know of a party who has been convicted or pleaded guilty to any criminal offense regarding child abuse or neglect, or determined to be the perpetrator thereof, in this or any other state?

YES _____ NO _____ If yes, furnish details: _____

3. Information about criminal case(s):

List all of the criminal convictions, including guilty pleas, for you and the members of your household for the following offenses: any criminal offense involving acts that resulted in a child being abused or neglected; any domestic violence offense that is a violation of R.C. 2919.25; any sexually oriented offense as defined in R.C. 2950.01; and any offense involving a victim who was a family or household member at the time of the offense and caused physical harm to the victim during the commission of the offense.

<u>Name</u>	<u>Case Number</u>	<u>Court/State/County</u>	<u>Convicted of What Crime?</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

IF MORE SPACE IS NEEDED FOR ADDITIONAL CASES, ATTACH A SEPARATE PAGE AND CHECK THIS BOX .

4. The following information, including the Court's address and Case Number, is provided detailing any custody and/or parenting time proceeding, or child abuse or neglect proceeding, concerning the child/children pending in a Court of this or any other state. If none, state none.

5. The following are the names and addresses of any persons not a party to the proceeding including grandparents, if relevant, who have physical custody of the child/children or who claim to have custody, parenting time, or visitation rights with respect to the child/children:

6. The names and addresses of the maternal grandparents are as follows:

7. The names and addresses of the paternal grandparents are as follows:

I UNDERSTAND I HAVE A CONTINUAL DUTY AND REQUIREMENT OF THE COURT TO TIMELY UPDATE AND NOTIFY THE COURT IN WRITING REGARDING ALL OF THE PRECEDING INFORMATION, ESPECIALLY ANY RESIDENTIAL MOVES OR LOCATIONS OF MYSELF, CHILDREN, OR OTHERS, TEMPORARY OR NOT, AND OTHER COURT PROCEEDINGS. TIMELY MEANS WITHIN SEVEN DAYS.

OATH

(Do Not Sign Until Notary is Present)

I, (print name) _____, swear or affirm that I have read this document and, to the best of my knowledge and belief, the facts and information stated in this document are true, accurate and complete. I understand that if I do not tell the truth, I may be subject to penalties for perjury.

AFFIANT

Sworn before me and signed in my presence this ____ day of _____, _____

Notary Public