

**IN THE PROBATE COURT OF LOWNDES COUNTY
STATE OF GEORGIA**

IN RE:	:	CASE NO. _____
_____	:	
Minor	:	
_____	:	
Guardian(s)	:	Personal Status Report Annual Report on Condition of Minor

NOTE: THIS FORM MUST BE TYPED OR LEGIBLY PRINTED IN BLACK INK.

****AN UPDATED PHOTO OF MINOR CHILD
MUST ACCOMPANY THIS REPORT EACH YEAR ****

1. I/We, _____,
am/are the guardian(s) of the above-named minor, and my/our annual report on the
condition of the minor is as follows:

2. Present age of minor: _____ Date of Birth: _____

3. Living Arrangements:
 - a. Current physical address of the minor is:

Street Address City, State, ZIP

 - b. The ward/minor has been in the present residence since _____.
If moved within the past year, state change(s) and reason(s) for change:

 - c. The minor does does not live full time with the guardian(s). If not, the
minor has lived with the following person(s) during the past year for the period(s) of
time indicated: _____

 - d. I/We recommend a more suitable living arrangement for the minor as follows:

4. Physical Health
 - a. The minor's general, physical condition is excellent good fair poor.

 - b. During the past year, the minor's physical condition has
 remained about the same.
 improved; explain: _____
 worsened; explain: _____

5. Education

a. The minor is not yet of school age is enrolled in school at:

b. The minor's performance in school is excellent good fair poor. If only fair or poor, the following is the guardian's plan for improving the school performance of the minor:

6. Social Activities/Services

a. The minor's current social condition is excellent good fair poor.

b. During the past year, the minor's social condition has

remained about the same.

improved; explain: _____

worsened; explain: _____

c. During the past year, the minor has participated in the following activities (explain):

recreational: _____

social: _____

7. We believe that the minor has the following unmet needs (if any): _____

8. The guardianship should should not be continued because: _____

9. I/We also serve as conservator(s) for the minor. If so, my/our accounting for the current year is filed simultaneously with this report was filed earlier on is not yet due but will be filed on _____ has not been filed because _____

OR

I/We do not serve as conservator(s) for the ward/minor. I/We have have not received funds for the support, care, education, health and welfare of the ward/minor. If so, following is a description of the amount(s) and expenditures of all such funds received by me/us during the reporting period:

10. My/Our current contact information is:

Printed Name of Guardian

Printed Name of Co-Guardian

Street Address

Street Address

City, State, ZIP

City, State, Zip

Mailing Address, if different

Mailing Address, if different

City, State Zip, if different

City, State Zip, if different

Cell Number Home Number

Cell Number Home Number

Work Number Other

Work Number Other

Electronic Mail (Email) Address

Electronic Mail (Email) Address

Verification

The answers to the foregoing questions and the information provided with regard to the ward/minor are true and correct to the best of my/our personal knowledge and belief and are hereby made under oath.

Guardian's Signature

Co-Guardian's Signature

Printed Name of Guardian

Printed Name of Co-Guardian

Sworn to and subscribed before me
on _____

Sworn to and subscribed before me
on _____

Notary Public/ Clerk of Probate Court

Notary Public/ Clerk of Probate Court