

PROBATE COURT OF WOOD COUNTY, OHIO
DAVID E. WOESSNER, JUDGE

In the Matter of:

Case Number: _____

The Guardianship of

**APPLICATION FOR APPROVAL
OF GUARDIAN TO PROVIDE
DIRECT SERVICES
[Sup. R. 66.09 (G); 66.04D]**

The undersigned, guardian of the above-named Ward, makes application to the court for approval to act as a direct services provider in accordance with Sup. R. 66.09 (G). Said services are described below.

Type of Services to Be Provided:

Services are authorized by law pursuant to the following ORC and/or OAC section(s):

Amount and Source of Income Received for Services (may include cost projection tool if applicable):

A hearing is being requested. Please state the name of the person requesting the hearing and the reason:

The Board of Developmental Disabilities will provide supplemental documentation for this request including, but not limited to, a Letter of Intent and Provider Certification Verification.

This documentation:

is attached.

will be filed with the Court by Woodlane. The assigned SSA is

_____.

Attorney Signature

Guardian's Signature

Attorney's Printed Name

Guardian's Printed Name

Address

Address

Phone

Phone