Background Check

for a Guardianship Case at the Superior Court, County of San Francisco

To: Proposed Guardian

P.O. Box 7988

San Francisco, CA 94120

The Department of Human Services will check for criminal records and history of child abuse or neglect for your guardianship case at the San Francisco Superior Court.

- 1 Attach **filed** copies of these forms: O Petition for Appointment of Guardian, GC-210 O Declaration of Proposed Guardian, PGF-1 O Confidential Guardian Screening Form, GC-212 O Notice of Hearing, GC-020 The person who wants to be Guardian must answer these questions: Your name: _____ Hearing date: ___ /___ /___ Your address: _____ Your birth date: ____ /___ Social Security #: _____ Driver's License #: _____ Phone #: (____)___ Guardianship of: _____ Case No.: _____ Will any other adult (18 or older) live in the same home as the proposed guardian or spend a lot of time with the child? \square Yes If "Yes", fill out information below for each adult. If more than 3 other adults, attach another sheet with their information. **Other Adult #1** Name: ______ Date of Birth: ____ / ____ Social Security #: _____ Driver's License #: _____ **Other Adult #2** Name: ______ Date of Birth: ____ / ____ Social Security #: _____ Driver's License #: _____ **Other Adult #3** Name: ______ Date of Birth: ____ / ____ Social Security #: _____ Driver's License #: _____ 8 Proposed Guardian signs and dates here: **9** Ask a server to mail your forms to: San Francisco Department of Human Services Legal Guardianship Unit, J350
- After mailing, the server must fill out the *Proof of Service by Mail* on the back of the *Notice of Hearing* form and give it back to you.