

A Caretaker Authorization Affidavit **may be** created if:

1. A child is living with a grandparent who has made reasonable attempts to locate and contact both of the child's parents or the child's guardian or custodian but has been unable to do so.

A Caretaker Authorization Affidavit **may not** be executed if any of the following proceedings are pending regarding the child:

1. A proceeding for the appointment of a guardian for, or the adoption of, the child
2. A juvenile proceeding in which one of the following applies
 - a. The temporary, permanent, or legal custody of the child or the placement of the child in a planned permanent living arrangement has been requested.
 - b. The child is the subject of an ex parte emergency custody order issued under division (D) of section 2151.31 of the Revised Code and no hearing has yet been held regarding the child under division (A) of section 2151.314 of the Revised Code.
 - c. The child is the subject of a temporary custody order issued under section 2151.33 of the Revised Code.
3. A proceeding for divorce, dissolution, legal separation, annulment or allocation of parental rights and responsibilities regarding the child.

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 **(circle all that apply)**:
 - (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.

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:

Signature: _____ Date: _____
Grandparent

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

Notary Public

NOTICE: The court *may* report this information to the Shelby County Department of Job & Family Service, Children Service Division, if it believes that the Affidavit is not in the child’s best interest or if the grandparent has a criminal or child abusing history.

To the Grandparents:

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 the following information with the Caretaker Authorization Form: The child's present address, the addresses of the places where the child has lived within the last five years:
 - a.
 - b.
 - c.
 - d.
 - e.

The present address of each person with whom the child has lived during that period:

- a.
- b.
- c.
- d.
- e.

That I **(do) (do not)** have information of any parenting proceeding in a court of this or any other state concerning any child herein.

That I **(do) (do not)** know of any person not a party to the proceedings, who claims to be the residential parent of the child or who claims to have custody or visitation rights with respect to the child.

That I **(have) (have not)** been convicted of a criminal offense involving an act that resulted in a child being abused or neglected or have been determined to be the perpetrator of an act that was the basis of an adjudication of abuse or neglect.

Further affiant sayeth naught.

Grandparent

Sworn to absolutely before me and subscribed in my presence this ____ day of _____, 200____

Notary Public

IN THE COURT OF COMMON PLEAS
OF SHELBY COUNTY, OHIO

COURT INFORMATION FORM

_____, being first duly sworn, states in answer to the following questions hereinafter set forth:

Child #1

Child's full name Date of birth

Child's address

Child #2 (if applicable)

Child's full name Date of birth

Child's address

Child's Mother

Mother's full name Date of birth

Mother's address

Mother's telephone number Cell phone number

Mother's Employer and Employer's address

Child's Father

Father's full name Date of birth

Father's address

Father's telephone number Cell phone number

Father's Employer and Employer's address

Guardian/Custodian (if other than parent)

Guardian/custodian's full name

Date of birth

Guardian/Custodian's address

Guardian's telephone number

Cell phone number

Guardian's Employer and Employer's address

1. Who has legal (court-ordered) custody of the child(ren) whose custody or visitation you seek:

2. Where (what county and what court) was legal custody established?

3. Who has physical possession of the child(ren) at this time?

4. Were the parents of this/these child(ren) ever married ___ YES or ___ NO

5. Was paternity established? ___ YES or ___ NO In what county and state was paternity established?

6. What is your relationship to the child? _____

7. How many adults are in your home? _____

8. Has Shelby County Department of Job and Family Services ever been involved with this/these children ___ YES or ___ NO If YES, please explain _____

9. Have you ever been to this Court before any matters concerning this child? ___ YES or ___ NO If YES, please explain _____

Affiant

Sworn to before me and subscribe in my presence this _____ day of _____, 20__.

Notary Public

Notices:

1. An Ohio notary public must notarize the grandparent's signature.
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. A grandparent who executes a second or subsequent caretaker authorization affidavit regarding a child who is the subject of a prior caretaker authorization affidavit must file the affidavit 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. On filing, the court will schedule a hearing to determine whether the caretaker authorization affidavit is in the child's best interest.
4. 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.
5. A person or entity that relies on this affidavit, in good faith, has no obligation to make any further inquiry or investigation.

Termination of Affidavit

6. This affidavit terminates on the occurrence of whichever of the following occurs first: (1) one year elapses following the date the affidavit is notarized; (2) the child ceases to live with the grandparent who signs this form; (3) the parent, guardian, or custodian of the child acts to negate, reverse, or otherwise disapprove of an action or decision of the grandparent who signed this affidavit; or (4) the affidavit is terminated by court order; (5) the death of the child who is subject of the affidavit; or (6) the death of the grandparent who executed the 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.

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 of the affidavit terminates.

Medical Treatment/School Enrollment

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.

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.
3. A school district or school official that reasonable 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 education 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.

Caretaker Authorization Affidavit (CAA) Checklist

Check off all statements that are true. If any statement is not true, do not check the statement. **The CAA cannot be filed unless all statements are checked off as being true.**

- The forms are legible (all information is readable).
- The CAA is signed by the grandparent(s).
- The CAA contains the address, driver's license # or identification card #, and date of birth of the signing grandparent.
- The grandparent's residence is in the state of Ohio.
- The CAA contains the name of the child and the child's date of birth.
- The child is under the age of 18.
- There are no pending proceedings regarding the child for: the appointment of guardian or for an adoption; temporary, permanent, or legal custody, or for placement in a planned permanent living arrangement; an ex parte emergency order; divorce, dissolution, legal separation, annulment, or allocation of parental rights and responsibilities.
- The CAA is correctly notarized (signed and dated by the notary public, sealed and stamped).
- The CAA was signed and notarized within the past five days.
- There is no other non-expired CAA or Power of Attorney (POA) existing with the court regarding the child.

This document must be filed with the CAA

Notice:

The grandparent requesting the CAA must provide a photo ID (driver's license/identification card) at time of filing