## Rule 8.37—Form 2: Background Check Information for a Proposed Guardian of a Minor

## **Instructions:**

- Iowa Code section 232D.307 requires the court to conduct a criminal records check and checks of the child abuse, dependent adult abuse, and sex offender registry for a proposed guardian of a minor, and requires the proposed guardian to pay the background check fee (\$15.00). Note: The clerk of court will keep this information form confidential.
- Do not give copies of this form to anyone except the clerk of court or your attorney, if you have one.
- If there is no existing guardianship approved by the court, file this form and a Petition to Establish a Guardianship for a Minor with the clerk of court.

If you do not understand how to use this form, or if you are unsure whether you should use this form, talk to an attorney.

In the Iowa District Court for	County (Juvenile Division)	
In the Matter of the Guardianship of:	Juvenile no	
Initials of Protected Minor	Background Check Information for a Proposed Guardian of a Minor	
Protected Minor.		
	Iowa Code § 232D.30	
Guardian states as follows:		
1. Proposed Guardian's personal in	formation	
A. Current legal name		
Full first name	Full middle name rite "N/A" if no middle name))	
B. Personal identifying information		
/ /		
Date of birth (month/day/year)	Gender Social security number	
<ul><li>C. All other names ever used (inclu nicknames)</li></ul>	ding any other previous legal names and	
Alternate name #1		
Full first name	Full middle name Full last name (write "N/A" if no middle name)	
Alternate name #2		
Full first name	Full middle name Full last name (write "N/A" if no middle name)	

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Alternate

2.

name #3				
	Full first name	Full middle name (write "N/A" if no middle name)	Full last name	
Alternate name #4				
name #4	Full first name	Full middle name (write "N/A" if no middle name)	Full last name	
Alternate name #5				
name ne	Full first name	Full middle name (write "N/A" if no middle name)	Full last name	
Alternate name #6				
name #o	Full first name	Full middle name (write "N/A" if no middle name)	Full last name	
Alternate				
name #7	Full first name	Full middle name (write "N/A" if no middle name)	Full last name	
Alternate				
name #8	Full first name	Full middle name (write "N/A" if no middle name)	Full last name	
Alternate				
name #9	Full first name	Full middle name (write "N/A" if no middle name)	Full last name	
Certifica	ation and release autho	rization		
Certifica	ation: I confirm that the ir	nformation provided above	e is true and correc	ct.
history re history d law. I un court red	ecord check with the Div lata concerning me main nderstand this can inclu	ermission for the court to vision of Criminal Investion tained by the DCI may build information concerning tion of the terms of a defe	gation (DCI). Any se released as allong cases expunge	criminal owed by ed from
Si	ignature of Proposed Guardian	Month		Year
*Handwrite	e your signature on this form. Scc	an the form after signing it and file	e it electronically.	