

**Elder Justice Center  
Professional Guardian File Requirements  
Initial File Review Form**

**Name of Guardian:** \_\_\_\_\_

**Reviewer:** \_\_\_\_\_

**Date of review:** \_\_\_\_\_

<b>Statutory requirements</b>	<b>Compliance yes/no</b>	<b>Deficiency letter mailed/emailed</b>	<b>Date corrected</b>
Application for appointment as a Guardian FS 744.3125(1)(2)			
Proof of Original Blanket Fiduciary Bond FS 744.2003(2)			
	<b>Expires:</b>		
Copy of credit history no older than six months ( <i>please include an explanation regarding any adverse accounts and what procedures have been put in place to prevent adverse accounts from reoccurring</i> ) FS 744.3135			
FDLE criminal background results received by the Hillsborough County Clerk of the Circuit Court FS 744.3135			
Proof of Registration with Office of Public & Professional Guardians (OPPG) FS 744.2002			
	<b>Expires:</b>		