

# Legal Guardian Appointment Consent

I, , being the legal parent/guardian of , born on , hereby appoint:

Guardian Name:

Guardian Address:

as the Temporary Legal Guardian of my child for the period starting from  to .

I give my consent for the above-named Guardian to make decisions regarding the health, education, and welfare of my child during this period.

Special Instructions (if any):

Signature of Parent/Legal Guardian:

Date: