

Temporary Custody Agreement

Only for Students that are not living with Biological parent(s)

I, _____, the biological legal parent of the following child (ren):

(Please list full names and date of birth)

Do hereby give temporary custody to: (name and relationship to the child (ren):

Name Relationship to child (ren)

I currently reside at: _____ and
Physical Address City State Zip

_____ currently resides at _____
(My child (ren) name here) Physical Address

_____. I further give my permission for

City State Zip

_____ to care for my child (ren) in his/her home
(Name of Temp guardianship here)

and to apply for, consent to, or otherwise obtain any medical treatment or any economic, social, educational, or other services that my child(ren) my need.

Print biological Parent

Signature of biological Parent

Date

(Print Name of Temp guardianship)

Signature of Temporary Guardianship

Date

Taken, subscribed and sworn to before the undersigned authority this _____ day of _____, 2_____.

My commission expires _____.

Print Name-Notary Public

Signature –Notary Public