



# ORDER APPOINTING GUARDIAN AD LITEM OF MINOR

(MINOR GUARDIANSHIP)  
IN THE STATE OF ILLINOIS, CIRCUIT COURT

COUNTY: \_\_\_\_\_  
*County Where You Are Filing the Case*

GUARDIANSHIP OF: \_\_\_\_\_  
*First, Middle, and Last Name of Minor Child*

Case Number \_\_\_\_\_



A **Guardian ad Litem** (GAL) is a person appointed by the judge to investigate the best interests of the minor and make a report to the court. The judge will tell you if you need to fill out this form.

## ORDER

The Court has reviewed the pending *Petition* and hereby orders that:

1. A Guardian ad Litem (GAL) is appointed for:

Minor: \_\_\_\_\_  
*First, Middle, Last Name                      Age                      Current Street Address, Apt. #, State, Zip Code*

2. The following person or organization is appointed as Guardian ad Litem (GAL) in this case:

a. Name: \_\_\_\_\_  
*First, Middle, and Last Name or Organization Name*

b. Address: \_\_\_\_\_  
*Street, Apt. #, City, State, and Zip Code*

c. Telephone: \_\_\_\_\_

d. Email Address: \_\_\_\_\_

3. The GAL shall have all the duties, powers, and authority defined for their role by 750 ILCS 5/506.

4. Each party shall fully cooperate with the GAL's investigation. Parties will provide all requested documents and information, as well as sign any consent forms needed to obtain information about the minor, the parents, and other interested parties.

5. The GAL is authorized to review and copy any records relating to the minor. These records include: school, medical, psychological, DCFS, juvenile court, financial, any other agency involvement, and any other pertinent records.

6. Fees:

☐ The GAL will complete all duties without charging a fee (pro bono);

☐ Petitioner has been granted a fee waiver:

☐ The County Treasurer shall pay the fees of the GAL

☐ \_\_\_\_\_ shall pay the fees of the GAL; OR

☐ The GAL will be paid as follows:

\_\_\_\_\_  
\_\_\_\_\_

**COURT DATE INFORMATION:**

Information about getting a court date and how to attend is available from the Circuit Clerk's office. You can find their contact information at [ilcourts.info/clerks](http://ilcourts.info/clerks). If you are e-filing in Cook County, you may get the court date when you e-file.

The court date is scheduled on:

\_\_\_\_\_ at \_\_\_\_\_ ☐ a.m. ☐ p.m. in \_\_\_\_\_.  
*Month, Day, Year* *Time* *Courtroom Number*

Type of hearing: ☐ status ☐ on the Petition for Guardianship

**CONTACT INFORMATION****PETITIONER'S INFORMATION**

a. Name: \_\_\_\_\_  
*First, Middle, Last Name*

b. Address: \_\_\_\_\_  
*Street, Apt. #, City, State, and Zip Code*

c. Telephone: \_\_\_\_\_

d. Email Address: \_\_\_\_\_

e. Relationship to the minor is: \_\_\_\_\_

f. Lawyer information if represented in this case:

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email address: \_\_\_\_\_

**OTHER PARTY INFORMATION**

a. Name: \_\_\_\_\_  
*First, Middle, Last Name*

b. Address: \_\_\_\_\_  
*Street, Apt. #, City, State, and Zip Code*

c. Telephone: \_\_\_\_\_

d. Email Address: \_\_\_\_\_

e. Relationship to the minor is: \_\_\_\_\_

f. Lawyer information if represented in this case:

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email address: \_\_\_\_\_

g. This person:

☐ objects to the Petition. ☐ does not object to the Petition. ☐ unknown.

**OTHER PARTY INFORMATION**

- a. Name: \_\_\_\_\_  
*First, Middle, and Last Name*
- b. Address: \_\_\_\_\_  
*Street, Apt. #, City, State, and Zip Code*
- c. Telephone: \_\_\_\_\_
- d. Email Address: \_\_\_\_\_
- e. Relationship to the minor is: \_\_\_\_\_
- f. Lawyer information if represented in this case:  
Name: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email address: \_\_\_\_\_
- g. This person:  
☐ objects to the Petition. ☐ does not object to the Petition. ☐ unknown.

**OTHER PARTY INFORMATION**

- a. Name: \_\_\_\_\_  
*First, Middle, and Last Name*
- b. Address: \_\_\_\_\_  
*Street, Apt. #, City, State, and Zip Code*
- c. Telephone: \_\_\_\_\_
- d. Email Address: \_\_\_\_\_
- e. Relationship to the minor is: \_\_\_\_\_
- f. Lawyer information if represented in this case:  
Name: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email address: \_\_\_\_\_
- g. This person:  
☐ objects to the Petition. ☐ does not object to the Petition. ☐ unknown.

Additional Orders:

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**ENTERED:**

\_\_\_\_\_  
*Judge*

\_\_\_\_\_  
*Date (Month, Day, Year)*