

**Kinship Legal Guardianship
Certification of Caregiver of _____,
as to Knowledge of Identity and/or Location of Parents**

I, _____, do hereby certify that:

The child's parent 1 is: _____.

and lives at : _____

Date of last contact: _____, 20

I do not know where he/she lives.

The child's parent 2 is: _____.

and lives at : _____

Date of last contact: _____, 20

I do not know where he/she lives.

The following person(s) has had legal and/or physical custody of this child:

1. _____

address at: _____

Date of last contact: _____, 20

I do not know where he/she lives.

2. _____.

he/she lives at: _____

Date of last contact: _____, 20

I do not know where he/she lives.

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Signature: _____

Date: _____