

**GUARDIANSHIP EXAMINING COMMITTEE MEMBER OR  
DEVELOPMENTAL DISABILITIES EXAMINING COMMITTEE MEMBER  
TRAINING AFFIDAVIT**

I, \_\_\_\_\_, swear or affirm that I have completed the  
*(Print name)*  
required four hours of initial training within 4 months after my initial appointment or have had it waived  
by the Chief Judge of the Sixth Judicial Circuit, as required by § 744.331(3)(d), Florida Statutes. I  
understand that I must complete two hours of continuing education during each 2-year period after the  
initial training, as required by § 744.331(3)(d), Florida Statutes, during the term of the Agreement.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

The foregoing was sworn to or affirmed and signed before me on \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

My Commission Expires:

\_\_\_\_\_  
(Print, type or stamp commissioned name of Notary Public)

\_\_\_\_ Personally known  
\_\_\_\_ Produced identification  
Type of identification produced \_\_\_\_\_

**This completed Affidavit must be submitted ELECTRONICALLY to the  
Office of Court Counsel at [SixthCircuitContracts@jud6.org](mailto:SixthCircuitContracts@jud6.org)**

**If you do not have the ability to scan and email, please submit by U.S. Mail to:  
Court Counsel's Office  
501 1<sup>st</sup> Avenue North, Suite 1000  
St. Petersburg, FL 33701**