



Guardianship Certification Board
 205 W. 14th Street, Suite 600, Tom C. Clark Bldg, Austin,
 Texas 78701

\$25.00
Application Fee
 Must accompany this
 application

Certification Application Form

1. Name		Marroquin David T. Last First M.I. Suffix		2. Date of Birth		09/19/1948 mm/dd/yyyy		
3. Provisional Certification		If you are provisionally certified at the time you file this application, check here <input type="checkbox"/> and provide continuing education information under question #9.				Provisional Certification Number		
4. Address (both home and work addresses must be provided)	Home		100 E Kerria Street		McAllen City Tx 78501 State Zip		956-687-4274 Phone	
	Work		100 N. Closner 3 rd Floor Street or P.O. Box		Edinburg City Tx 78539 State Zip		956-318-2385 Phone	
	dtmarroquin@yahoo.com Email Address				Other Phone (e.g., cell) 956-432-0448		956-292-7649 FAX	
5. Contact Preference		Mail: <input type="checkbox"/> Home XXX Work (if both, or neither, is selected, Board-related mailings will be sent to work address) XXX E-Mail: If this box is selected, Board staff will communicate with you by e-mail, except when notice by U.S. mail is required.						
6. Education	High School		Mercedes HS High School Name		Mercedes, Texas High School Location		05/1967 Graduation Date: mm/yyyy	
	Or		Equivalency Type				Date: mm/yyyy	
	College or University		Name and Location of School		Dates Attended		Degree	Major
		UT Pan American, Edinburg Tx		From To Mo Yr Mo Yr 08 71 08 74		BS	Criminal Justice ⁺	
7. Work Experience (provide at least 10 years of experience. Attach separate sheet if necessary)	Start Date		Leave Date		Employer:		Location:	
	Mo Yr		Mo Yr		Hidalgo County Probate Court		100 N. Closner, 3 rd Floor, Edinburg, Tx 78539	
	04 05		Current					
	Describe experience: Probate Court Investigator and visitor. Visit wards at home and institutions and primary liaison person between the court and state and local agencies and institutions.							
	Start Date		Leave Date		Employer: Social Security Administration		Location: McAllen, Texas	
	Mo Yr		Mo Yr					
11 74		05 01						
Describe experience: Interviewed and completed applications for Social Security, Supplemental Security Income benefits and Medicare. Also worked as a supervisor and public relations. Did training for new employees.								
Start Date		Leave Date		Employer:		Location:		
Mo Yr		Mo Yr						
Describe experience:								
8. Exams/ Certification	Texas Exam				Center for Guardianship Certification Exam			
	Passed? XX		Date Expect to Take		Passed? XX Yes		Date Expect to Take	
Yes Date Taken		<input type="checkbox"/> No		Date Taken		<input type="checkbox"/> No		

CGC Registered Guardian: CGC Certification Date 05/31/2009 In good standing? Yes No

9. Continuing Education (provide only if you are provisionally certified when you file this application)

If you answered "Yes" to question #3, provide the following information on courses you took during the period you were provisionally certified, and provide verification of attendance for each course. (Attach separate sheet if necessary.)

date of course	sponsor	name and location of course	total hours	ethics hours	legislative update hours

10. Have you ever been adjudged guilty of or entered a plea of no contest in return for a grant of deferred adjudication to any felony or misdemeanor other than juvenile offenses or misdemeanor traffic offenses?

Note: Answer yes even if your plea resulted in a probation or deferred adjudication that was successfully completed and subsequently dismissed.

Driving While Intoxicated is NOT considered a traffic offense and should be reported.

No Yes – Provide a certified copy of the charging instrument, judgment, and disposition, including dates, charges, court, court location, and any other pertinent information.

11. Have you ever been relieved of responsibilities as a guardian by a court, employer, or client for actions involving fraud, moral turpitude, misrepresentation, material omission, misappropriation, theft conversion or breach of fiduciary duty?

No Yes – Provide details on separate sheet.

12. Have you ever been found civilly liable in an action, or settled a claim, involving allegations of fraud, misrepresentation, material omission, misappropriation, moral turpitude, theft, conversion, or breach of fiduciary duty on your part?

No Yes – Provide details on separate sheet.

13. Have you ever been denied certification, or had your certification revoked or suspended in Texas or any other jurisdiction requiring certification, registration or licensure to provide guardianship services?

No Yes – Provide details on separate sheet.

I certify under penalty of perjury that the information provided in this application is true and correct. I have read and understand the Guardianship Certification Board's Rules Governing Guardianship Certification and Minimum Standards for Guardianship Services and agree to comply with the current and subsequent Rules and Minimum Standards. I understand that the fee submitted with this application is non-refundable. I understand that if I am certified, I will have a continuing obligation under Rule X(c) and (d) of the Rules Governing Guardianship Certification to notify the Board if there is a change in circumstances.

(Must be signed before a Notary Public) Signature: [Signature]

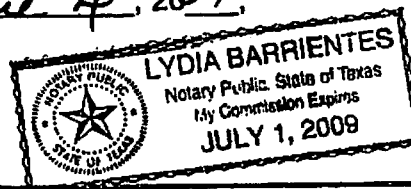
Date: 6/4/09

State of TEXAS County of Aridalgo

Subscribed and sworn to before me on June 4, 2009

[Signature]

Notary Public, State of TEXAS



**TO THE COUNTY AUDITOR
AFFIDAVIT FOR PAYMENT OF MEMBERSHIP DUES**

**THE STATE OF TEXAS
COUNTY OF HIDALGO**

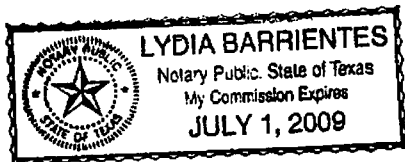
I, David T. Marroquin, do hereby state that my membership in the Texas Guardianship Certification Board on behalf of Hidalgo County and dues to be paid by Hidalgo County is necessary in the performance of my duties as an official employee of Hidalgo County. I further state to the best of my knowledge and belief the following:

1. My participation in the association or organization is for the betterment of County Government and the benefit of me as a County official or employee;
2. The association or organization is not affiliated with a labor organization;
3. Neither the association or organization nor an employee of the association or organization directly or indirectly influences or attempts to influence the outcome of any legislation pending before the legislature.
4. The association or organization may provide information for a member of the legislature to appear before a legislative committee at the request of the committee or member of the legislature to provide information related to County Government, but not to attempt to influence legislation; and
5. Neither the association nor organization directly or indirectly contributes any money, services, or other valuable thing to a political campaign or endorses a candidate or group of candidates for public office.

SIGNATURE: David T. Marroquin
TITLE: Probate Court Investigator

DATE: 6/12/09

Before me Lydia Barrientes, a Notary Public, appeared David T. Marroquin and on his/her oath deposed and stated that the facts as set forth in the above affidavit to be true and correct in every respect.



(SEAL)

Lydia Barrientes
NOTARY PUBLIC IN AND FOR
THE STATE OF TEXAS

AUTHORITY TO OBTAIN AFFIDAVIT:	LGC § 113.064(b)
AUTHORITY TO PAY MEMBERSHIP DUES:	LGC § 89.002