

FORM 125A. CONSENT TO ADOPTION

STATE OF VERMONT
DISTRICT OF _____, SS

PROBATE COURT
DOCKET NO. _____

IN RE THE ADOPTION OF _____, A MINOR
OF _____

CONSENT TO ADOPTION

15A V.S.A. § 2-406

NOW COMES the undersigned person, _____,
and does swear or affirm under oath to the facts set forth herein and does consent to the adoption
described herein as set forth in more detail below:

(1) My full name is _____; my date of birth is _____; my
current mailing address is _____; I am
(check one) married; single and never married; single and divorced.

(2) The full name of the minor to be adopted is _____:
(circle one) his or her date of birth is _____ and the time of birth
was _____ (A.M./P.M.). The minor is currently living at the following address:

and has lived there for _____ (weeks, months or years).

(3a) The name and address of the adoptive parents are known to me and their name(s) and address
is as follows (Please give the names, addresses and telephone numbers, if available, or if unavailable
or unknown to you, please give whatever information you have):

_____.

The name of the attorney representing the prospective adoptive parent(s) is:
_____ and his or her address and telephone number is:
_____.

(3b) The full name and address of the other parent is:

_____.

If full name and address is not provided, please state the reason:

_____.

(4) I am voluntarily and unequivocally consenting to the transfer of legal and physical custody to, and adoption of, the above-named minor child by the proposed adoptive parent(s) who I have selected and who are identified in paragraph #3 above. I further believe that the adoption of the minor is in the minor's best interest.

(5) I understand that I may revoke this consent by notifying the court in writing within 21 days after this consent is executed that I wish to revoke this consent. (I understand that if I and the prospective parents agree, we may jointly revoke this consent anytime before finalization of the adoption. If the prospective adoptive parents do not agree to revoke after the 21 day period then the consent becomes irrevocable on the 22nd day after its execution.) I understand that if this consent is obtained by fraud or duress, or if an adoption petition is not filed within 45 days after the minor was placed for adoption without good cause, then I may petition the court to have this consent revoked. The petition may be filed in the court in which the adoption is pending, if known, or in the court in which this consent is signed.

(6) The name and address of the court in which the adoption petition has been filed, or will be filed, is: _____ . If unknown, the name and address of the court in which a motion to set aside this consent on the basis of fraud, duress or otherwise, would be filed is: _____ District Probate Court located at _____ .

(7) I certify to the following:

- (a) I have read this consent, or I have had it read to me;
- (b) English is my native language (if not, see 15A V.S.A. § 2-406(a));
- (c) I am signing this consent voluntarily;
- (d) I have received a copy of this consent;
- (e) Before signing this consent, I have been informed of the meaning and consequences of adoption. I understand that, unless otherwise provided in this consent, my signing of this consent and failure to revoke the consent terminates any right I may have to object to the minor's adoption by the prospective adoptive parent(s). I also have been informed about the consequences of misidentifying the other parent of this child and the procedure for releasing information about health, characteristics, and identity of myself to the adoptee;
- (f) If I am a minor, I certify that I was advised by an attorney who is not representing the adoptive parent or the adoption agency to which the child is being relinquished; the name of the attorney is _____ and he or she is present as this consent is being executed;
- (g) If I am an adult, I certify that I was informed of my right to have an attorney represent me in this matter who is not representing the adoptive parent or representing the adoption agency to which the child is being relinquished;
- (h) I have provided to the adoptive parents, or their agent, nonidentifying information and information about the child's and my family's health history and background as required by 15A V.S.A. § 2-105, and I understand that before the adoption becomes final, if information becomes available to me which was unavailable previously, then I have an obligation to provide this information;

(i) I have been made aware that it is in the best interests of the adoptee that I keep the court or the adoption agency informed of my current address and any family health problems of mine which may develop which could affect the child so that the court or agency may respond to any inquiry concerning the adoptee's medical or social history. I have also been made aware of the procedure for releasing information about the health and other characteristics of the parent which may affect the physical or psychological well-being of the adoptee and the procedure for release of the parent's identity pursuant to Article 6 of the Vermont Adoption Act.

(j) I have not received or been promised any money, or anything of value, in exchange for my executing this consent except for payments which are authorized under 15A V.S.A. § 7-103 and which are itemized on an attachment to this consent; I (circle one) have/have not been a recipient of public assistance during the last 12 months;

(k) The minor child (circle one) is/is not an Indian Child as defined in the Indian Child Welfare Act, 25 U.S.C. § 1901 et seq.

(l) That I (chose one)

- waive notice of any proceeding for adoption of the adoptee;
- waive notice of the adoption unless the adoption is contested, appealed or denied;
- do not waive notice of any proceeding for adoption and I would like to be notified at my address as set forth above;

(m) I understand that the adoption will make any orders or agreements for visitation or communication with the minor unenforceable;

(n) I understand that after this consent has been executed in compliance with § 2-405 and not revoked in compliance with § 2-408 or § 2-409, then the consent becomes final and may not be revoked or set aside for any reason, including the failure of the adoptive parent or agency to permit me to visit or communicate with the minor adoptee. I further understand that this consent will extinguish all parental rights and obligations, and the adoption will completely terminate every aspect of the legal relationship which I may have concerning the minor, except for arrearages of child support.

(o) That before executing this consent I was informed of the availability of personal counseling by a certified adoption counselor, or other counselor of my choice and legal counseling.

(8) If this consent is being made conditional upon other conditions which are authorized under 15A V.S.A. § 2-406(e), then those conditions are set forth with particularity here. (If none, so state.)

(9) I (circle one) have/have not participated as a party, witness, or in any other capacity in any litigation or action concerning the custody or support of the above-named minor in Vermont or any other state. I (circle one) have/have no knowledge of any person or adoption agency or state agency who has physical or legal custody of the child, or who claims to have custody or visitation rights with this child. (Any affirmative answer in this paragraph requires a description of the action or claim, including the court and docket number if available.)

I swear that the factual information set forth in this consent is true and correct to the best of my knowledge and belief.

Dated this _____ day of _____, 19____, at _____,
County of _____, and State of _____.

(signature)

(typed or printed name)

CERTIFICATION

The Consent to Adoption set forth above was signed in my presence, pursuant to 15A V.S.A. § 2-405. Those facts set forth in the consent were sworn to, under oath or affirmation, and I hereby certify that I explained to the person executing the consent the contents and consequences of the consent, and to the best of my knowledge or belief, the person executing the consent:

- (a) read this consent, or had it read to them;
- (b) signed this consent voluntarily;
- (c) received a copy of this consent;
- (d) was informed about the consequences of misidentifying the other parent of this child and the procedure for releasing information about health, characteristics, and identity of myself to the adoptee;
- (e) if a minor, the minor signing the consent was advised by an attorney who is not representing the adoptive parent or the adoption agency to which the child is being relinquished; the name of the attorney is _____ and he was present as this consent was executed;
- (f) if an adult, the person was informed of his or her right to have an attorney represent them in this matter who is not representing the adoptive parent or representing the adoption agency to which the child is being relinquished;
- (g) if a mother who has not identified a biological father, then the mother responded to inquiries as provided for under 15A V.S.A. § 3-404;
- (h) if a parent is deceased, then the person signing the consent has provided the names and addresses of the persons described in 15A V.S.A. § 3-401(a)(6);
- (i) the person understands that personal counseling was available by a certified adoption counselor, or other counselor, of his or her choice;
- (j) I have received a statement from the adoptive parent indicating an intention to adopt as required in 15A V.S.A. § 2-405(e).
- (k) The person signing this consent has also been made aware of the procedure for releasing information about the health and other characteristics of the parent which may affect the physical or psychological well-being of the adoptee and the procedure for release of the parent's identity pursuant to Article 6 of the Vermont Adoption Act.

Dated this _____ day of _____, 19____, at _____,
County of _____, and State of _____.

(signature)

(printed name) of Judge or other person authorized under statute