

Your name(s)

a. _____

b. _____

Relationship to child: _____

Address _____

City: _____ State: _____ Zip: _____

Telephone number: _____

I am the child listed in _____ and I agree to the adoption.

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I agree to the other parent's adoption of the child.

I/we are the adopting parents listed in ①, and I/we agree that the child will:

- a. Be adopted and treated as my/our legal child
- b. Have the same rights and duties stated in the tribal customary adoption order dated _____

Date: _____

Your name: _____

Case Number: _____

8 Executed

a. This form was signed outside of a hearing.

(1) This form was signed **in** California

This form was signed in front of the following type of witness

- notary public
- court clerk
- probation officer
- qualified court investigator
- authorized representative of a licensed adoption agency
- county welfare department staff member

(2) This form was signed **outside** of California

This form was signed in front of the following type of witness

- notary public
- other person authorized to perform notarial acts
- authorized representative of an adoption agency that is licensed in the state or country where this form was signed

(3) Witness information

This form was signed in: _____

Name of witness: _____

Agency witness works for _____

Date: _____

Witness signature: _____

b. This form was signed at a hearing in front of a judicial officer.

Date: _____

