CONNECTICUT PROBATE COURTS

DECENTED:	CONFIDENTIAL		
RECEIVED:			
Instructions: 1) A birth mother who was identified or located by a prospective adoptive parent who is unrelated to the child must receive counseling within 72 hours of the birth of the child or as soon as medically possible after the birth of the child. In the case of a child whose age exceeds 72 hours and when counseling was not delayed as a result of a medical condition, the counseling must be offered to the birth mother prior to placement of the child. Counseling must also be offered to a birth father, if known. A birth parent may use this form to file an affidavit with the Probate Court stating that the birth mother has received the counseling, or the birth father has been offered the counseling required under C.G.S. section 45a-728 and corresponding regulations promulgated by the Commissioner of Children and Families. 2) For more information concerning identified adoptions, see C.G.S. sections 45a-727 to 45a-729 and Regulations 45a-728-1 to 45a-728-10. 3) Type or print the form in ink.			
Probate Court Name		District Number	
In the Matter of		Date of Birth of Minor Child	
Hereinafter reformation Affiant/Birth Mother (Name and address.)	department or facility.)	Birth Mother by (Name and address of agency, ate Counseling provided:	
Affiant/Birth Father (Name and address.)	deparment or facility.)	th Father by (Name and address of agency, Date Counseling offered:	
THE AFFIANT SWEARS, AFFIRMS OR AVE	ERS THAT:	•	
 I am the birth mother of a minor child who was identified or located by a prospective adoptive parent unrelated to the child. I received counseling by a qualified counselor from the above department, agency or facility:			
I am the birth father of a minor child who was identified or located by a prospective adoptive parent unrelated to the child. I have been offered counseling by a qualified counselor from the above department, agency or facility: Within 72 hours of the birth of the child. As soon as medically possible after the birth of the child, OR Having decided to place the child for adoption after the birth of the child, prior to the placement.			

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	CONFIDENTIAL	
In the Matter of		
	Hereinafter referred to as the minor child.	
Signature of Birth Mother		
Type or Print Name		
Date		
Subscribed and sworn to before me		
Date		
Signature		
Type or Print Name		
Title	Judge, Clerk, Notary Public, Commissioner of Superior Court	
Signature of Birth Father		
Type or Print Name		
Date		
Subscribed and sworn to before me		
Date		
Signature		
Type or Print Name		
Title	Judge, Clerk, Notary Public, Commissioner of Superior Court	