

CONFIDENTIAL

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- Instructions:**
- 1) The statutory parent, child-placing agency or a person giving a child in adoption may use this form to provide information about the parents who are deceased or whose rights were terminated and adoptive parents of a minor child in an adoption proceeding.
 - 2) This form shall be filed in duplicate with a) the petition for appointment of a statutory parent or for adoption, b) a certified copy of the long form birth certificate of the minor child 3) documents in support of the petitioner's representation that the child is free for adoption, including certified decrees and/or certified death certificates and 4) Record of Adoption (Department of Public Health form, VS-51).
 - 3) Type or print the form in ink.

Probate Court Name	District Number
In the Matter of (Full name and address)	Date of Birth of Minor Child
Hereinafter referred to as the minor child.	Place of Birth of Minor Child

Proposed Name of Minor Child after Adoption	Name of Minor Child on Birth Certificate
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The child is free for adoption because the parental rights of the following parents have been terminated or the parents are deceased:

<p>Parent (Full name and address)</p> <p>Date of Birth</p> <p>If deceased, give date and place of death.</p> <p>If parental rights were terminated, list court and decree date.</p>	<p>Parent (Full name and address)</p> <p>Date of Birth</p> <p>If deceased, give date and place of death.</p> <p>If parental rights were terminated, list court and decree date.</p>
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<p>Statutory Parent (Name and address of main or local office)</p> <p>Date of Appointment</p> <p>Court of Appointment</p>	<p>Court-appointed Guardian of the Person of Minor</p> <p>Date of Appointment</p> <p>Court of Appointment</p>
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<p>Adoptive Parent (Full name and address)</p> <p>Telephone number</p> <p>Date of Birth</p> <p>Relationship to child</p>	<p>Adoptive Parent (Full name and address)</p> <p>Telephone number</p> <p>Date of Birth</p> <p>Relationship to child</p>
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Date and place of marriage of adopting parents, if applicable

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THE SUBSCRIBER REPRESENTS THAT the foregoing information submitted in connection with the petition for approval of the Adoption Agreement concerning the minor child is true to the best of my knowledge and belief.

The representations made in this petition are made under the penalty of false statement.

Signature of Subscriber

Title

Type or Print Name

Date
