

STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	CONSENT TO ADOPTION BY AGENCY/COURT	FILE NO.
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In the matter of _____ DOB: _____, adoptee
Full name of child

1. I, _____, on behalf of _____
*Name *Name of agency or court
 voluntarily consent to the adoption of the child named above by _____
 _____ as requested in a petition on file or to be filed in court.

2. I am a representative authorized to execute this consent.

 Date

 Signature

 Title

Subscribed and sworn to before me on _____, in _____ County, Michigan.
Date

My commission expires: _____ Signature: _____
Date Notary public

*The consenting party in item 1 must be one of the following:

1. A representative authorized to consent on behalf of the Michigan Department of Health and Human Services or of a child-placing agency to whom the child has been permanently committed by an order of the family division of the circuit court.
2. The family division of the circuit court having permanent custody of the child. (Notarization not required.)
3. A representative authorized to consent on behalf of the Michigan Department of Health and Human Services or of a child-placing agency to whom the child has been released.
4. A representative authorized to consent on behalf of a child-placing agency of another state or country, which has authority to consent to the adoption.
5. An individual or official authorized by tribal law or order of the tribal court to give consent.

Do not write below this line - For court use only