COUNTY OF ST. LOUIS IN THE JUVENILE DIVISION OF THE CIRCUIT COURT OF THE COUNTY OF ST. LOUIS STATE OF MISSOURI In re: Case No. Case No. Case No. Consent TO Adoption by Co-petitioner Consent To Adoption by Co-petitioner I reside at	STATE OF MISSOURI)) SS
OF THE CIRCUIT COURT OF THE COUNTY OF ST. LOUIS STATE OF MISSOURI In re: Case No	COUNTY OF ST. LOUIS)
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Case No	
CONSENT TO ADOPTION BY CO-PETITIONER My name is	In re:
CONSENT TO ADOPTION BY CO-PETITIONER My name is	Case No
I reside at	(*Cniia*)
I am a (CONSENT TO ADOPTION BY CO-PETITIONER
I am a (My name is
l am a (□ male □ female) and my date of birth is I acknowledge that the following statements are completed by me and each statement is true, complete, and correct to the best of my knowledge. 1. The Child,	
l am a (□ male □ female) and my date of birth is I acknowledge that the following statements are completed by me and each statement is true, complete, and correct to the best of my knowledge. 1. The Child,	I reside at (Address)
to the Child,	
in	
in	1. The Child, was born on
2. My relationship to the Child is: I am the (□ mother □ father) of the Child. 3. Because I believe it is in the best interest of the Child and his or her future welfare, I voluntarily and of my own free will, forever consent to the lawful adoption of the Child by myself and □ (Co-petitioner/Spouse) I UNDERSTAND AND INTEND THAT THIS CONSENT TO ADOPTION IS FINAL ONCE IT IS ACCEPTED AND APPROVED BY A COURT OF COMPETENT JURISDICTION. 4. I understand that as the parent of the Child, I may have the primary right to custody of the Child, and that my co-petitioner presently does not have any such custody rights. I further understand that if the Court grants the adoption of the Child by the co-petitioner and me, that I will then be prospectively sharing custody rights over the Child with my co-petitioner. 5. I have completed years of education. 6. □ I read and understand the English language; or □ I understand English and this Consent form was read to me; or □ This Consent form was read to me in my native language of	(Full legal name) in
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by	☐ This Consent form was read to me in my native language of
(ηρμο οι ιπτοιπιστοι	by

7.	Check	k and complete all that apply:	
		At the time of the Child's birth. I was married to	
	_	At the time of the Child's birth, I was married to	
		I was married to, within the last 300 (Full legal name)	days prior to
		the Child's birth.	
		I am not married.	
		I was not married at the time of the Child's birth; I am now married to	
		(Full legal name)	
		My marriage to was legally dissolved on	
		(Full legal name)	(date)
8.	I have	e talked to and am represented by	regarding this
		ent as evidenced by such attorney's signature below.	0 0
	Conoc	one de evidenced by eden dicemely e signature below.	
9.		The Child is currently under the jurisdiction of the Juvenile Court/Family Court in	
		County,, in case number	
10	. By co	ompleting and signing this Consent I certify to the Court that I: Hereby submit to the jurisdiction of the Court of the State of Missouri.	
	ii.	Understand that this Consent will be filed with the Family Court in St. Louis County Missouri and any other court in which proceedings concerning the Child may be per	
	iii.	Have had enough time to carefully consider whether or not consent to the adoption my own best interest and the best interest of the Child.	n is in
	iv.	Have given careful thought to my decision to proceed with this Consent to adoption	n.
	V.	Am not under the influence of any drug, medication, or other substance which might my reasoning or judgment.	ht affect
	vi.	Have executed this Consent to adoption of my own free will and without any dures influence from anyone.	s or undue
	vii.	Have not been given any money or gifts, and no one has promised me any money exchange for my Consent other that payment of expenses allowed by law.	or gifts in
11	. 🗆	I am the birth mother, and I have not misrepresented to any man who could be the this Child that:	father of
	i.	I was not pregnant;	
	ii.	That the pregnancy was terminated; or	
	iii.	That the Child had died; or	
	iv.	That the Child is not his.	

	, do hereby a	cknowledge	e that the statements provi	
Full leg above are true and co	al name)	-		·
SIGNATURE OF PARENT)		(DATE)		(TIME)
(SIGNATURE OF ATTORNEY) PRINTED NAME OF ATTORNEY) (BAR#)		(DATE)		(TIME)
		(PHONE #)		(PHONE #)
State of	, County of		, on this	day of
n the year 20 befo	ore me,			, a Notary Public in and fo
said state, personally a	ppeared			, known to me to be the
person who executed the	ne within Consent to Ado	ption, and ackr	nowledged to	o me that
		executed the	e same for tl	he purpose herein stated.
NOTARY PUBLIC EMBOSSER SEAL				E RUBBER STAMP IN AR AREA BELOW
	Signature of Notary Public		•	
	Printed Name of Notary Public	:	-	
	My Commission Expires		-	
If not notarized, Conse	nt must be witnessed by	two adult witne	sses who a	re qualified as indicted below
THE UNDERSIGNED \	WITNESSES CERTIFY B	SY THEIR SIGN	NATURES T	HAT
-	(Full le	gal name of parent)		
				Y AND FREELY GIVEN. W VE PARENTS OF THE ABO
NATURE OF WITNESS #1)	(PRINTED	NAME OF WITNES	SS)	(DATE)

(SIGNATURE OF WITNESS #2)	(PRINTED NAME OF WITNESS)	(DATE)
(ADDRESS OF WITNESS #2)		
The foregoing CONSENT TO	ADOPTION BY(MOTHER'S NAME OR FA	ATHER'S NAME)
n re:	has been reviewed	d, accepted and approved.
(C	חובט)	
Ву:		_
FAMILY COURT COMMISSIONE	R/DIVISION JUDGE/I	DIVISION
Date:	Date:	