** CIRCUIT COURT FOR	, MARYLAND
	City or County
Located at	Case No
Court Address	
V	ys.
Petitioner	Respondent
CONSENT OF PARENT TO A PU (FORM S	JBLIC AGENCY GUARDIANSHIP 9-102.1)
	HIP WITH THE RIGHT TO CONSENT TO
ADOPTION OF	TO THE

INSTRUCTIONS

These instructions and attached consent form may be used only in cases where the child is a Child in Need of Assistance. Code, Family Law Article, Title 5, Subtitle 3, Part II.

DEPARTMENT OF SOCIAL SERVICES

The attached consent form is an important legal document. You must read all of these instructions BEFORE you sign the consent form. If you do not understand the instructions or the consent form, you should not sign it. If you are under 18 years old or if you have a disability that makes it difficult for you to understand, do not sign the consent form unless you have a lawyer.

A. Right to Have This Information in a Language You Understand

You have the right to have these instructions and the consent form translated into a language that you understand. If you cannot read or understand English, you should not sign the consent form. You should have this form translated for you into a language you do understand. The translated consent form is the one you should read and decide whether or not to sign. Any translation must have an affidavit attached in which the translator states that it is a true and accurate translation of this document.

B. Right to Speak with a Lawyer

You have the right to speak with a lawyer before you decide whether or not to consent.

If you are unable to afford a lawyer, you may be eligible for a lawyer through the Office of the Public Defender. You should contact the Office of the Public Defender, and ask for a lawyer to represent you in a D.S.S. (Department of Social Services) guardianship case.

You should not sign the consent form without a lawyer if you are under 18 years old or have a disability that makes it difficult for you to understand this document. If you are under 18 years old or have a disability that makes it difficult for you to understand this document, you are required to have a lawyer review the form with you before you can consent to the guardianship. You should contact the Office of the Public Defender, or let the Juvenile Court know that you need to have a lawyer appointed for you.

Even if you do not have the right to have the court appoint a lawyer for you or to be represented through the Office of the Public Defender, you have the right to speak with a lawyer you choose before you decide whether to consent.

C. Post-adoption Agreement

If you have made a written agreement with the adoptive parents for future contact (known as a post-adoption agreement), a copy of that agreement must be attached to the signed consent form. If you have a post-adoption agreement, and, after the adoption, the adoptive parents do not do what they agreed to do, it will not affect your consent to the guardianship or the adoption. However, if that happens, you have the right to ask a judge to make them do what they agreed to do. The judge can order you and the adoptive parents to go to mediation, order the adoptive parents to do what they agreed to do, or change the agreement if the judge decides that it is in the child's best interest.

D. Conditional Consent

If you decide to sign the consent form, you will have two choices:

- (1) you can consent to the guardianship and the adoption of your child by a family approved by D.S.S.; or
- (2) you can consent to the guardianship only if the child is adopted into a specific family. This is called a "conditional consent." If you sign a conditional consent, and the family whose name is on the consent cannot adopt the child, your consent will no longer be valid. The court will try to locate you to find out if you want to sign a new consent. If you do not sign a new consent, the court can have a trial to decide whether or not your parental rights should be ended (terminated) and whether or not guardianship with the right to consent to adoption should be granted to D.S.S., even without your consent.

E. Effect of Signing the Consent Form

IF YOU SIGN THE CONSENT FORM, AND THE GUARDIANSHIP IS GRANTED, YOU WILL BE GIVING UP ALL RIGHTS AND RESPONSIBILITIES RELATING TO THE CHILD.

If you have a post-adoption agreement, you will keep only the rights the agreement gives you. Violation of the agreement will not affect your consent or the adoption.

After you sign the consent form, the person or agency to whom you give the form must file it in the Juvenile Court promptly. If a guardianship case has been filed, it will be filed in the guardianship case. If a guardianship case has not been filed, it will be filed in the child's CINA (Child in Need of Assistance) case. When it is filed, a copy of the filed consent form will be sent to you at the address you list at the end of the consent form. It is your responsibility to let the court know if your address changes.

F. Right to Revoke Consent

If you sign the consent form and then change your mind and no longer want to consent, you have the right to revoke (cancel) the consent within 30 days after the date that it is filed in Juvenile Court. The only way that you can revoke this consent is by giving a signed written revocation statement with the name, sex, and date of birth of the child (if you know it) to:

Juvenile Clerk, Circuit Court for		at
	(Address).	

The written and signed revocation statement must be sent to the court, not to your social worker or lawyer. You may deliver your written revocation of consent in person or by mail. If it is not <u>received</u> by the Juvenile Clerk's office within 30 days after the date the consent form was filed in court, it will be too late, and you will not be able to withdraw the consent or stop the guardianship from being granted.

G. Further Notice of Guardianship and Adoption Proceedings

A petition for guardianship with the right to consent to adoption has been or will be filed in
Juvenile Court. If you sign the consent form, your written
consent form will also be filed in the Juvenile Court. You have the right to be notified when
the petition is filed, about any hearings before or after guardianship is granted, if and when
guardianship is granted, and if and when the child is adopted. Any notices will be sent to the
address given by you on the consent form, unless you write to the Juvenile Clerk at
(court's address) and give the clerk your new address.
You may waive (give up) your right to notice if you wish to do so. Even if you give up your right
to notice, someone from the court may contact you if further information is needed.

H. Compensation

Under Maryland law, you are not allowed to charge or receive money or compensation of any kind for the placement for adoption of your child or for your agreement to the adoptive parent having custody of your child, except that reasonable and customary charges or fees for adoption counseling, hospital, legal, or medical services may be paid.

I. Access to Birth and Adoption Records

When your child is at least 21 years old, your child, your child's other parent, or you may apply to the Secretary of the Maryland Department of Health for access to certain birth and adoption records. If you do not want information about you to be disclosed (given) to that person, you have the right to prevent disclosure by filing a disclosure veto. Attached to this document is a copy of the form that you may use if you want to file a disclosure veto.

J. Adoption Search, Contact, and Reunion Services

When your child is at least 21 years old, your child, your child's other parent or siblings, or you may apply to the Director of the Social Services Administration of the Maryland Department of Human Services for adoption search, contact, and reunion services.

K. Rights Under the Indian Child Welfare Act

If you or your child are members of or are eligible for membership in an Indian tribe, as defined by federal law, you have special legal rights under the Indian Child Welfare Act. You should not sign this consent form if you believe this may apply to you. You should tell the person requesting the consent or the court that you believe that your child's case should be handled under the Indian Child Welfare Act.

L. Authorization for Access to Medical and Mental Health Records

You may be asked to sign a separate form (authorization) to allow the adoptive parents and D.S.S. to get your child's medical and mental health records or your medical and mental health records. If you agree to allow access to this information, the records given to the adoptive parents will not include identifying information about you unless identifying information was previously exchanged by agreement.

M. Signature, Witness, and Copy

If you decide to complete and sign the consent form, you must have a witness present when you sign it. The witness must be someone 18 or older and should not be the child or the child's other parent. You must complete and sign the form with a pen and print or type in your name, address, and telephone number. The witness also must sign the form and print or type in the witness' name, address, and telephone number in the blanks on the last page.

If you have a post-adoption agreement, you must attach a copy to the signed consent form.

You have the right to receive a copy of the signed consent form.

STOP HERE IF YOU DID NOT UNDERSTAND SOMETHING YOU HAVE READ OR IF YOU WANT TO SPEAK WITH A LAWYER BEFORE YOU DECIDE IF YOU WANT TO SIGN THE CONSENT FORM.

If you wish to sign the consent form,	you must also sign	n here to verify	that you read these
instructions and understand them:			

(Signature)	(Date)

You must attach a copy of these signed instructions to the signed consent form.

CONSENT TO GUARDIANSHIP WITH THE RIGHT TO CONSENT TO ADOPTION OF _____TO DEPARTMENT OF SOCIAL SERVICES Use a pen to fill out this form. You must complete each section. A. Identifying Information 1. Language. I understand English, or this consent form has been translated into______, a language that I understand. 2. Name. My name is _____ 3. Age. My date of birth is 4. Child. The child who is the subject of this consent was born on _____ (date) at (name of hospital or address of birthplace), in (city, state, and county of birth). 5. Status as Parent. Check **all** that apply. (a) I am \Box the mother of the child \Box the father of the child \Box alleged to be the father of the child (b) I was married to the mother of the child \square at the time of conception of the child \square at the time the child was born. B. Right to Speak with a Lawyer I WANT TO COMPLETE THIS CONSENT FORM BECAUSE: Check **one** of the following: ☐ I already have spoken with a lawyer whose name and telephone number are _____. I have read the instructions in front of this form, and I am ready to consent to the guardianship with the right to consent to adoption. OR ☐ I am at lease 18 years old and am able to understand this document. I have read the instructions at the front of this form, and I do not want to speak with a lawyer before I consent to the guardianship with the right to consent to adoption.

F. Effect of this Consent

I UNDERSTAND THAT IF I SIGN THIS CONSENT FORM, AND GUARDIANSHIP IS GRANTED, I WILL BE GIVING UP ALL RIGHTS AND RESPONSIBILITIES RELATING TO THE CHILD, EXCEPT THOSE RIGHTS THAT I HAVE KEPT UNDER ANY WRITTEN POST-ADOPTION AGREEMENT.

G. Oath and Signature

I have read carefully and understand the instructions at the front of this consent form. I am signing this consent form voluntarily and of my own free will.

I solemnly affirm under the penalties of perjury that the contents of this consent form are true to the best of my knowledge, information, and belief.

(Date)	(Signature)
	(Printed Name)
	(Address)
	(City, State, Zip Code)
Witness:	(Telephone Number)
(Signature)	(Date)
(Printed Name)	
(Address)	
(City, State, Zip Code)	
(Telephone Number)	

A COPY OF THE INSTRUCTIONS WITH YOUR SIGNATURE MUST BE ATTACHED TO THIS CONSENT FORM.

IF YOU HAVE A POST-ADOPTION AGREEMENT, ATTACH A COPY TO THIS CONSENT FORM.