



CIRCUIT COURT FOR _____, MARYLAND

City/County

Located at _____

Court Address

Telephone _____

Case No. _____

vs.

Petitioner

Respondent

CONSENT BY PARENT TO GUARDIANSHIP WITH THE RIGHT TO CONSENT TO ADOPTION OF _____ BY _____

Name of Child

Name of Local Department/Guardian

(Md. Rule 11-309)

INSTRUCTIONS

The attached written consent form is an important legal document. You must read all of these instructions BEFORE you decide whether to 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. What a Consent Means

If you sign this consent, you are agreeing and acknowledging that the court may, and likely will, enter an order that:

- 1. Except as otherwise specified in this consent, terminates all of your parental rights to your child;
- 2. Makes the local department of social services the legal guardian of the child;
- 3. Grants to the local department of social services the authority to consent to the adoption or other planned permanent living arrangement of the child without the need of any further consent by you; and
- 4. Also grants to the local department of social services the authority to take other actions regarding the child specified in § 5-325 (b) of the Courts and Judicial Proceedings Article of the Maryland Code.

B. Right to Speak with a Lawyer

- 1. You have the right to speak with a lawyer before you decide whether to sign the consent.
- 2. If a lawyer has been appointed for you in a CINA case, speak with that lawyer before you decide whether to sign this consent. If a lawyer has not been appointed for you and you are unable to afford a lawyer, you may be eligible for a lawyer free of charge 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. The Public Defender's telephone number is _____. The e-mail address is _____.
- 3. If you are under 18 years old or have a disability that makes it difficult for you to understand this document, you must 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.
- 4. 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.

2. 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 received 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.

H. Further Notice of Guardianship and Adoption Proceedings

1. A petition for guardianship with the right to consent to adoption has been or will be filed in the Juvenile Court for _____ City/County _____. If you sign the consent form, it will also be filed in the Juvenile Court.
2. You have the right to be notified when the petition is filed, about any hearings before or after a guardianship is granted, and if a guardianship is granted, 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. Receiving notice of a hearing does not give you the right to attend the hearing. If you wish to be present at a hearing, you may contact the court and request permission to attend.

I. 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.

J. 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 Maryland Secretary of the 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.

K. 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.

L. 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 Federal Indian Child Welfare Act (25 U.S.C. § 1901). 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.

M. 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 the guardian 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.

N. 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 but may 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’s name, address, and telephone number in the blanks on the last page.

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 first sign 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 OR OTHER
PLANNED PERMANENT LIVING ARRANGEMENT OF
TO

Use a pen to fill out this form. You must complete each section.

A. Language of Form

1. The instructions and this consent form are in _____, which is a language I can read and understand.
Language
2. If the form is in a language other than English, attached to it is an affidavit in English of the person who translated the document from English attesting that the translation is accurate and listing the translator's qualifications.

B. Identifying Information

1. *Name.* My full name is _____.
2. *Age.* My date of birth is _____.
3. *Child's Birth Information.* The child who is the subject of this consent was born on _____
at _____ in _____
Name of Hospital or Address of Birthplace City, State, and County, and Country of Birth
Date
4. *Status as Parent*
 - (a) I am
 - the mother of the child; the father of the child; alleged to be the father of the child; or
 - found by a court to be the "de facto" parent of the child.
 - (b) If I checked "alleged to be the father of the child" or "found by a court to be the 'de facto' parent of the child" (**Check all that apply**):
 - (1) I was married to the mother of the child at the time of conception of the child.
 - (2) I was married to the mother of the child at the time the child was born.
 - (3) I was the registered domestic partner of the parent of the child at the time of conception of the child.
 - (4) I was the registered domestic partner of the parent of the child at the time the child was born.
 - (5) I was named as the father on the child's birth certificate.
 - (6) The child's mother named me as the child's father.
 - (7) I have been adjudicated by a court to be the child's father.
 - (8) I have acknowledged myself orally or in writing to be the child's father.
 - (9) On the basis of genetic testing, I have been have not been indicated to be the child's biological father.
 - (10) I do not know if I am the father of the child.
 - (11) I deny that I am the father of the child.

C. Advice of Counsel; 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 _____, regarding this form and whether I should consent to the guardianship. 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 least 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.

D. Rights Under the Indian Child Welfare Act

Check the following statement if it applies to you:

I am not a member of an Indian tribe or eligible to become a member of an Indian tribe.

OR

I am a member of an Indian tribe or believe I may be enrolled in a tribe. The name of the tribe is _____, located in _____.

E. Consent

Check **one** of the following statements:

After consulting or having the opportunity to consult with an attorney, I voluntarily and of my own free will consent to the ending (termination) of my parental rights and responsibilities with respect to my child and to the appointment of _____ Department of Social Services or Montgomery County Department of Health and Human Services to be the guardian of my child, with the right of the guardian to consent to the child’s adoption or other planned permanent living arrangement.

OR

I voluntarily and of my own free will consent to the ending (termination) of my parental rights and to the appointment of _____ Department of Social Services or Montgomery County Department of Health and Human Services, to be the guardian of my child on the condition that my child is adopted by _____.

F. Further Notice

Check **one** of the following:

I give up (waive) the right to any further notice of the guardianship case, any reviews after guardianship is granted, or when my child is adopted.

OR

I give up (waive) the right to any further notice of the guardianship case or any reviews after guardianship is granted, but I want to be notified when my child is adopted.

OR

I want to be notified about everything that happens in the guardianship case, all reviews after guardianship is granted, and when my child is adopted.

G. 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
City/County

Address

H. 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.

I. 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
_____	_____
Street Address	Printed Name
_____	_____
City, State, Zip	Telephone Number
_____	_____
E-mail	Fax

Witness:

_____	_____
Date	Witness Signature
_____	_____
Street Address	Printed Name
_____	_____
City, State, Zip	Telephone Number
_____	_____
E-mail	Fax