

SURROGATE'S COURT OF THE STATE OF NEW YORK
COUNTY OF _____

In the Matter of the Adoption of A Child
Whose first Name Is

(Docket)(File) No.

CONSENT OF CHILD
OVER 14
(Private-Placement)

.....
The undersigned adoptive child, who is _____ years old, having been born on _____,
hereby consents to (his) (her) adoption by _____), the
petitioning adoptive parent(s) in the above-entitled proceeding.

Dated: _____,

Child

Adoptive Parent: typed or printed name/ signature

Adoptive Parent: typed or printed name / signature

Adoptive child if over 14: typed or printed name/ signature

Attorney if any: typed or printed name/signature

Attorney's Address and Telephone number

STATE OF NEW YORK)
 ss.:
COUNTY OF _____)

On [specify date]: _____, [specify name]: _____
personally appeared before me. (He)(She) is personally known to me or proved (his)(her) identity to me
by satisfactory evidence as the person whose name is subscribed on this consent. (He)(She) acknowledged
to me that (he)(she) executed this consent.

Notary Public

STATE OF NEW YORK)
 ss.:
COUNTY OF _____)

On this _____ day of _____, _____, before me personally came _____
_____ proven to me by the oath of _____ an attorney
admitted to practice in the State of New York to be the person described in and who executed the foregoing
instrument and duly acknowledged that (he)(she) executed the same.

Judge of the _____ Court