

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.

EXTRAJUDICIAL CONSENT
(Birth or Legal Parent -
Private-Placement -
Step-parent)

1. I, _____, residing at _____
_____, am the (birth) (legal) parent of _____. I do hereby consent to the
adoption of my (daughter) (son) _____
_____, born on _____
by [specify name]: _____, adoptive parent.

2. The name and last known address of the other (birth)(legal) parent of the adoptive child are
[delete if inapplicable]: _____

Dated: _____, _____.

(Birth)(Legal) Parent: 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 extrajudicial surrender.
(He)(She) acknowledged to me that (he)(she) executed this surrender.

Notary Public