	IN		OR THE STATE OF ALASKA
In the	matter c	f the adoption of	
DOB:	(child's r	name after adoption) , A Minor Child,	
By		Petitioner.	) CASE NO CONSENT TO STEPPARENT ADOPTION (CHILD'S SPOUSE OR GUARDIAN)
1.	My name is		
	My relationship to the child being adopted,, (child's current full name) is:		
2.	I understand that before I sign this consent I have the right to consult with an attorney of my choice, at my expense.		
3.	I consent to the adoption of the above-named child by the petitioner named above.		
4.	I understand I have a limited right to withdraw my consent. I understand that my consent cannot be withdrawn after the judge signs the decree of adoption. However, before the adoption decree is signed, I can withdraw my consent as follows:		
	a. Within 10 days after I sign this form, I can deliver written notice to the court at the address in paragraph 5 or to the person who obtained my consent. This written notice must be delivered or postmarked by the tenth day.		
	a Q ii	a request to withdraw with th grant. My request will be grant	if the decree has not been signed, I can file the court, which the court may or may not the only if the court finds that it is in the best the petitioner and I are given notice and an
5.	I understand that the adoption petition will be filed in the Superior Court at:		
	Court Address:		
	Court T	elephone Number:	

- 6. The child is not a member of an Indian tribe or an Alaska Native Village. In addition, the child is not eligible for such membership, and neither of the child's biological parents is a member of an Indian tribe or an Alaska Native Village.
- 7. As the child's guardian, I understand that this consent is effective as a power of attorney under AS 13.26.020, delegating to petitioner parental authority over the care, custody and property of the minor child during the pendency of the adoption proceeding.
- 8. I am am not a minor. My date of birth is \_\_\_\_\_.
- 9. I acknowledge that I have received a copy of this consent (or will receive one after it is signed).

## Verification

I state on oath or affirm that I have read this consent form and believe all statements made in it are true.

Date

Signature of Person Giving Consent

Mailing Address

City

Zip

Daytime Phone

State

## ACKNOWLEDGEMENT & OATH

On \_\_\_\_\_, \_\_\_\_personally appeared (date) (name) before me in \_\_\_\_\_\_, Alaska, signed the above consent to adoption, certified under oath or affirmation that he/she has read it and believes its contents to be true, and acknowledged that he/she signed the consent freely and voluntarily for the purposes stated therein.

(SEAL)

Clerk of Court, Notary Public or other person authorized to administer oaths. My commission expires: \_\_\_\_\_