

COURT OF THE STATE OF NEW YORK
COUNTY OF _____

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

(Docket)(File) No.

CONSENT OF CHILD
OVER 14

The undersigned adoptive child, who is _____ years old, having been born on _____,
hereby consents to (his)(her) adoption by _____,
(and _____), 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 18: typed or printed name/ signature

Attorney if any: typed or printed name/signature

Attorney's Address and Telephone number

