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(Address of agency)

**OR**

---

(Name of attorney who represents the individual relinquishing parental rights or prospective adoptive parent)

---

(Address of attorney)

**OR**

---

(Name of court of the county in which the voluntary relinquishment form was or will be filed)

If I am the birth mother of the child, I understand that this consent to an adoption is irrevocable unless I revoke it within thirty (30) days after executing it by delivering a written revocation to:

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(Name of agency coordinating the adoption)

---

(Address of agency)

**OR**

---

(Name of attorney who represents the individual relinquishing parental rights or prospective adoptive parent)

---

(Address of attorney)

**OR**

---

(Name of court of the county in which the voluntary relinquishment form was or will be filed)

I have read and understand the above and I am signing it as a free and voluntary act.

NAME: \_\_\_\_\_ (mother/father)

AGE: \_\_\_\_\_

MARITAL STATUS: \_\_\_\_\_

NAME OF OTHER PARENT(S): \_\_\_\_\_

---

DATE

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Signature of Parent

\_\_\_\_\_  
Relationship to child/adoptee

PLACE OF EXECUTION: \_\_\_\_\_  
at \_\_\_\_\_ o'clock \_\_\_\_\_ M.

**WITNESS:**

_____ Relationship to Consenter	_____ Address
_____ Signature	_____ _____

**WITNESS:**

_____ Relationship to Consenter	_____ Address
_____ Signature	_____ _____

**(NOTE: If both parents consent, you must use two [2] separate forms.)**

**IN THE COURT OF COMMON PLEAS OF BUTLER COUNTY, PENNSYLVANIA  
ORPHANS' COURT DIVISION**

**IN RE: Adoption of** \_\_\_\_\_ : **OA No.** \_\_\_\_\_ **of** \_\_\_\_\_  
: \_\_\_\_\_  
: \_\_\_\_\_  
: \_\_\_\_\_  
: \_\_\_\_\_  
: \_\_\_\_\_  
: \_\_\_\_\_  
: \_\_\_\_\_

\_\_\_\_\_  
(Adoptee's name as on birth certificate)

**PETITION TO CONFIRM CONSENT TO ADOPTION**  
*(23 Pa.C.S.A. § 2504)*

***TO THE HONORABLE JUDGE OF SAID COURT:***

The Petition of \_\_\_\_\_  
(Adoptive parent(s) or Intermediary)  
respectfully represents:

**1.** This Petition relates to the confirmation of consent and termination of the parental right/rights and duties of the following: (“x” those that apply & list names, ages)

_____ NATURAL MOTHER _____	_____	_____
	(NAME)	(AGE)
_____ NATURAL FATHER _____	_____	_____
	(NAME)	(AGE)
_____ PUTATIVE FATHER _____	_____	_____
	(NAME)	(AGE)

**2.** *23 Pa.C.S.A. § 2504* authorizes an intermediary or adoptive parent(s) to file a Petition to Confirm Consent. The above-named petitioner(s) are adoptive parent(s)/intermediary. Petitioner(s) name(s) and address(es) are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3. ADOPTEE:**

- a. Name on birth certificate: \_\_\_\_\_
- b. Age of ADOPTEE: \_\_\_\_\_ Gender of ADOPTEE: \_\_\_\_\_  
Date of Birth of ADOPTEE \_\_\_\_\_
- c. Birthplace: \_\_\_\_\_
- d. Present Residence: \_\_\_\_\_  
\_\_\_\_\_
- e. Who has custody of ADOPTEE: \_\_\_\_\_  
Since When: \_\_\_\_\_
- f. Was ADOPTEE born out of wedlock? \_\_\_\_\_
- g. Religious affiliation: \_\_\_\_\_
- h. Racial background: \_\_\_\_\_
- i. Is this ADOPTEE and "Indian Child" pursuant to the Indian Child Welfare Act, 25 U.S.C. §1901 et. seq.? \_\_\_\_\_ Yes \_\_\_\_\_ No

**4. NATURAL MOTHER:**

- a. Name: \_\_\_\_\_
- b. Maiden name: \_\_\_\_\_
- c. Present Address: \_\_\_\_\_  
\_\_\_\_\_
- 1) If present address is unknown, list last known address: \_\_\_\_\_  
\_\_\_\_\_
- d. Age: \_\_\_\_\_ Date of birth: \_\_\_\_\_
- e. Birthplace: \_\_\_\_\_
- f. Present marital status: \_\_\_\_\_
  - (1) If married, name of spouse: \_\_\_\_\_
  - (2) If married, date & place of marriage: \_\_\_\_\_

- g. Was NATURAL MOTHER married at time of birth of ADOPTEE? \_\_\_\_\_
  - 1) If yes, name of spouse: \_\_\_\_\_
  - 2) If this marriage ended, state how and when: \_\_\_\_\_
- h. Was NATURAL MOTHER married one year prior to the time of birth of ADOPTEE?
  - (1) If yes, name of spouse: \_\_\_\_\_
  - (2) If this marriage ended, state how and when: \_\_\_\_\_
- i. Racial background: \_\_\_\_\_
- j. Religious background: \_\_\_\_\_

5. **NATURAL FATHER:**

- a. Name: \_\_\_\_\_
- b. Present address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 (1) If present address is unknown, list last known address:  
 \_\_\_\_\_  
 \_\_\_\_\_
- c. Age: \_\_\_\_\_ Date of birth: \_\_\_\_\_
- d. Birthplace: \_\_\_\_\_
- e. Present marital status: \_\_\_\_\_
  - (1) If married, name of spouse: \_\_\_\_\_
  - (2) If married, date & place of marriage: \_\_\_\_\_
- f. Was NATURAL FATHER married at time of birth of ADOPTEE? \_\_\_\_\_
  - (1) If yes, name of spouse: \_\_\_\_\_
  - (2) If this marriage ended, state how and when: \_\_\_\_\_
- g. Was NATURAL FATHER married one year prior to the time of birth of ADOPTEE?
  - (1) If yes, name of spouse: \_\_\_\_\_
  - (2) If this marriage ended, state how and when: \_\_\_\_\_
- h. Racial background: \_\_\_\_\_
- i. Religious background: \_\_\_\_\_

**6. PUTATIVE FATHER:**

If a PUTATIVE FATHER is named as a party-respondent in this Petition and has duly executed the consent as specified in *23 Pa.C.S.A. § 2711(d)* and which is attached hereto, the following information on PUTATIVE FATHER should be completed. Thereafter, the provisions of *23 Pa. C.S.A. § 2504* should be fulfilled.

[A PUTATIVE FATHER's parental rights/duties can be terminated in these proceedings even though he has not executed a consent. If a PUTATIVE FATHER has not executed a consent form as specified in *23 Pa. C.S.A. § 2711(d)* and petitioners desire to terminate the parental rights of a PUTATIVE FATHER as an adjunct to the Petition to Confirm Consent, the information section should be completed and the following requirements must be completed *23 Pa. C.S.A. § 2504(c)*]:

- a. Section of Petition relating to information about PUTATIVE FATHER.
- b. Attach as Exhibit or admit into evidence at Hearing on Petition a certification from the Department of Health that the PUTATIVE FATHER has not filed a claim of paternity pursuant to *23 Pa.C.S.A. § 5103*.
- c. Minimum ten (10) days written notice of the Hearing shall be given to the PUTATIVE FATHER. This notice shall include the specific language set forth in *23 Pa.C.S.A. § 2513(b)* and shall comply with all other requirements set forth therein.
- d. PUTATIVE FATHER has not filed written objections to termination of his parental rights/duties.
- e. PUTATIVE FATHER fails to appear at Hearing on this Petition.
- f. PUTATIVE FATHER did not execute a Consent to Adoption in accordance with *23 Pa.C.S.A. § 2711*
- g. Method of providing notice shall conform to *PA Orphans' Court Rule Nos. 5.1 & 15.6*.

**7. INFORMATION ON PUTATIVE FATHER:**

- a. Name of PUTATIVE FATHER: \_\_\_\_\_
- b. Age: \_\_\_\_\_ Date of birth: \_\_\_\_\_

- c. Birthplace: \_\_\_\_\_
- d. Last known address: \_\_\_\_\_
- e. Racial background: \_\_\_\_\_
- f. Religious background: \_\_\_\_\_
- g. Present marital status: \_\_\_\_\_  
 (1) If married, name of spouse: \_\_\_\_\_
- h. Was PUTATIVE FATHER ever married to NATURAL MOTHER: \_\_\_\_\_  
 (1) If yes, state beginning and ending dates of marriage:  
 From: \_\_\_\_\_ to: \_\_\_\_\_
- i. Explain the circumstances that create the status of PUTATIVE FATHER: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- 8. The NATURAL MOTHER and NATURAL FATHER do not intend to marry.
- 9. The adoptive parent(s) agree to accept custody of the ADOPTEE until such time as s/he may be adopted.
- 10. On the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, the consenting parent(s) has/have executed the consent(s) to Adoption of ADOPTEE as required by *23 Pa. C.S.A. § 2504*, but have failed for a period of at least forty (40) days after executing the consent, to file or proceed with a Petition for Voluntary Relinquishment of parental rights. Said ORIGINAL CONSENT(S) are attached hereto as Exhibit(s) numbered \_\_\_\_\_  
 \_\_\_\_\_



**WHEREFORE**, Petitioner(s) request(s) this Honorable Court to set an evidentiary Hearing date and thereafter to confirm the consent(s) to Adoption of ADOPTEE, terminate the parental rights/duties of the consenting parent(s) and award custody to the appropriate entity or parties.

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(Attorney for Adoptive Parent(s) / Intermediary)

**COMMONWEALTH OF PENNSYLVANIA    }**  
**}**       **ss:**  
**COUNTY OF BUTLER                        }**

The above-named Petitioner(s), being duly sworn according to law depose(s) and say(s) that the facts set forth in the above Petition to Confirm Consent are true and correct to the best of his/her/their knowledge, information, and belief.

---

(Signature(s) of Petitioner(s))

---

(Signature(s) of Petitioner(s))

Sworn to and subscribed before me this  
\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

---

*(Signature of Notary Public)*

**Notary Stamp:**

**(Alternative Attestation)**

I/We the above-named Petitioner(s) do verify that the statements contained in this Petition to Confirm Consent are true and correct to the best of my/our knowledge, information, and belief. I/We understand that false statements herein made are subject to the penalties of *18 Pa.C.S.A. § 4904* relating to unsworn falsifications to authorities. (The maximum penalty for such violation is a period of incarceration up to two years and a \$5,000.00, fine.)

Date: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***WITNESS:***

\_\_\_\_\_

(Name)

\_\_\_\_\_

(Address of Witness)

\_\_\_\_\_

\_\_\_\_\_

(Name)

\_\_\_\_\_

(Address of Witness)

\_\_\_\_\_

**CONSENT OF ADOPTEE:**  
(If over 12 years of age.)

I am over twelve (12) years of age, have read the foregoing Petition, and consent to my adoption by \_\_\_\_\_  
I also agree to have my name changed to \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Adoptee)

***WITNESS:***

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Address of Witness)

\_\_\_\_\_

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Address of Witness)

\_\_\_\_\_

**CONSENT OF NATURAL PARENT  
(Step-parent Adoption)**

As the natural parent (or parent by former adoption), **I consent to his/her adoption by my spouse.** I believe it is in the best interests of my child. I further agree to the name change as heretofore stated.

Date: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Natural or Adoptive Parent)

***WITNESS:***

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Address of Witness)

\_\_\_\_\_

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Address of Witness)

\_\_\_\_\_

**IN THE COURT OF COMMON PLEAS OF BUTLER COUNTY, PENNSYLVANIA  
ORPHANS' COURT DIVISION**

**IN RE:** :  
**ADOPTION OF** :  
: **OA No. \_\_\_\_\_ of \_\_\_\_\_**  
:  
:  
:

**PETITION TO CONFIRM CONSENT TO ADOPTION  
PRELIMINARY DECREE  
(23 Pa.C.S.A. § 2504)**

**AND NOW**, this \_\_\_\_\_ day of \_\_\_\_\_, to judicially resolve the attached Petition, it is **ORDERED** and **DECREED** that an evidentiary hearing is set for the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_ o'clock \_\_.M. in Courtroom No. \_\_\_\_\_ before Judge \_\_\_\_\_. At least ten (10) days written notice, as required by *23 Pa.C.S.A. §2503(b)* shall be given to the following:

- \_\_\_\_\_ parent(s) who have consented in attached Petition
- \_\_\_\_\_ parent(s) who have not consented in attached Petition
- \_\_\_\_\_ parent(s) or guardian(s) of consenting parent(s) who is/are under age 18

The parent(s) consenting in the attached Petition, and their parent(s) or guardian(s) if under 18 years of age, and/or the putative father whose parental rights are being exposed to termination, shall also be advised in said notice that their parental rights may be terminated at the aforesaid hearing.

Method of providing said notice shall conform to *PA Orphans' Court Rules Nos. 5.1 and 15.6*.

**BY THE COURT:**

**ATTEST:** \_\_\_\_\_, J.  
\_\_\_\_\_  
\_\_\_\_\_

**IN THE COURT OF COMMON PLEAS OF BUTLER COUNTY, PENNSYLVANIA  
ORPHANS' COURT DIVISION**

**IN RE:**                      **Adoption of**                      :

:

:

:

:

:

:

\_\_\_\_\_                      **OA No.** \_\_\_\_\_ **of** \_\_\_\_\_

(Adoptee's name as on birth certificate)

**PETITION TO CONFIRM CONSENT TO ADOPTION  
DECREE OF TERMINATION  
(23 Pa.C.S.A. § 2504)**

**AND NOW**, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, after review of the record and after an evidentiary Hearing, and following due notice, the Court makes the following findings and judicial determinations:

1. \_\_\_\_\_  
has/have executed a Consent to Adoption in accordance with *23 Pa.C.S.A. §2711 and §2504*.
  
2. The consenting natural parent(s) has/have failed to proceed with Voluntary Relinquishment of Parental Rights within forty (40) days of the execution of said consent(s).
  
3. ALL OF THE PARENTAL RIGHTS/RIGHTS AND DUTIES OF THE CONSENTING PARENT(S) ARE HEREBY FOREVER TERMINATED and the adoption of ADOPTEE may proceed without further consent of, or notice to, said consenting parent(s).

4. Custody of ADOPTEE is hereby transferred to:  
\_\_\_\_\_ The Adopting Parent(s)  
\_\_\_\_\_ An approved Agency. Said Agency is hereby authorized to give consent to the adoption of Adoptee.

5. \_\_\_\_\_  
(Name of Putative Father)

PUTATIVE FATHER of ADOPTEE having received proper and due notice in accordance with *23 Pa.C.S.A. §2504(b)* and has failed to file an acknowledgement of paternity pursuant to *23 Pa.C.S.A. §5103* and has failed to appear or to file written objections as required by *23 Pa.C.S.A. §2504(c)*.

THE PARENTAL RIGHTS/RIGHTS AND DUTIES OF SAID PUTATIVE FATHER ARE HEREBY TERMINATED pursuant to *23 Pa.C.S.A. §2504* and the adoption of ADOPTEE may continue without further consent of, or notice to, said putative father.

BY THE COURT:

\_\_\_\_\_, J.

ATTEST:

\_\_\_\_\_

IN THE COURT OF COMMON PLEAS OF BUTLER COUNTY, PENNSYLVANIA  
ORPHANS' COURT DIVISION

IN RE: Adoption of \_\_\_\_\_ :  
 :  
 :  
 : OA No. \_\_\_\_\_ of \_\_\_\_\_  
 :  
 (Adoptee's name as on birth certificate) :

**NOTICE OF PETITIONER & NON-PETITIONER**  
**(Other Parent, Putative Father, or Parent/Guardian of Minor Petitioner)**  
**CONFIRMATION OF CONSENT**  
*(23 Pa. C.S.A. §2504)*

TO: \_\_\_\_\_

A Petition has been filed asking the Court to put an end to all rights/duties you have to your child,\_\_\_\_\_. The Court has set a hearing to consider ending your rights/duties to your child. That hearing will be held in the Butler County Courtroom Number \_\_\_on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_ 'clock \_\_.M.

**IF YOU DO NOT APPEAR AT THE HEARING, THE COURT MAY DECIDE THAT YOU ARE NOT INTERESTED IN RETAINING YOUR RIGHTS TO YOUR CHILD, AND YOUR FAILURE TO APPEAR MAY AFFECT THE COURT'S DECISION ON WHETHER TO END YOUR RIGHTS/DUTIES TO YOUR CHILD. YOU ARE WARNED THAT EVEN IF YOU FAIL TO APPEAR AT THE SCHEDULED HEARING, THE HEARING WILL GO ON WITHOUT YOU, AND YOUR RIGHTS/DUTIES TO YOUR CHILD MAY BE ENDED BY THE COURT WITHOUT YOUR BEING PRESENT. YOU HAVE A RIGHT TO BE REPRESENTED AT THE HEARING BY A LAWYER. YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. IF YOU DO NOT HAVE A LAWYER OR CANNOT AFFORD ONE, GO TO OR PHONE THE OFFICES SET FORTH BELOW TO FIND OUT WHERE YOU CAN GET LEGAL HELP.**

Court Administrator  
Government Center  
PO Box 1208  
Butler, PA 16003-1208  
724/284-5200

Sarah E. Edwards  
Register of Wills & Clerk of Orphans' Court  
PO Box 1208  
Butler, PA 16003-1208  
724/284-5348

**If you are receiving this Notice as Putative Father of the above-named child, you rights/duties MAY ALSO BE TERMINATED UNLESS YOU FILE EITHER AN ACKNOWLEDGMENT OF PATERNITY OR CLAIM OF PATERNITY PURSUANT TO SECTION 5103 OF THE DOMESTIC RELATIONS CODE AND APPEAR AT THE HEARING TO OBJECT TO THE TERMINATION OR FILE A WRITTEN OBJECTION TO SUCH TERMINATION WITH THE COURT PRIOR TO THE HEARING.**