

Person Filing: _____
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Telephone: _____
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Lawyer's Bar Number: _____

FOR CLERK'S USE ONLY

Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN YAVAPAI COUNTY JUVENILE COURT

In the Matter of:

Case No: **SV**

(To be completed by the Court)

PETITION FOR TERMINATION OF PARENT-CHILD RELATIONSHIP

(SEVERANCE of PARENTAL RIGHTS)

A.R.S. § 8-531-544

(Full Legal Names of Minor Children)

1. INFORMATION ABOUT PETITIONER:

Name: _____

Birth Date: _____

Address: _____

Relationship to children: _____

2. INFORMATION ABOUT PARENT(S):

a. Mother's name: _____

Mother's birth date: _____

Mother's address: _____

b. Father's name: _____

Father's birth date: _____

Father's address: _____

(If more than one father involved, please attach same information for all fathers)

3. INFORMATION ABOUT THE CHILDREN:

a. Child's name: _____ male female

Child's birth date: _____

Child's birth place: _____

Child's address: _____

b. Child's name: _____ male female

Child's birth date: _____

Child's birth place: _____

Child's address: _____

c. Child's name: _____ male female

Child's birth date: _____

Child's birth place: _____

Child's address: _____

d. Child's name: _____ male female

Child's birth date: _____

Child's birth place: _____

Child's address: _____

(If more than four children, please attach information for all children)

4. The person or agency currently having legal custody, guardianship, acting *in loco parentis* (acting as parent) or providing care for the children is:

Name: _____

Address: _____

5. Will you or any person required to receive notice need a court interpreter? Yes No

If "Yes", Person's name: _____ Language(s) needed

Person's name: _____ Language(s) needed

Person's name: _____ Language(s) needed

6. **Jurisdiction** in Arizona is proper because the child or children are present in Arizona Yes No

If the child or children are not present in Arizona, jurisdiction in Arizona is proper because:

7. **Have there been any prior court cases concerning the children?** Yes No

If yes, list the name of the Court and the case number(s) _____

8. **Is any parent or child an enrolled member of any native American tribe or nation?**

Yes No Uncertain

If "yes" or "uncertain", please explain: _____

INSTRUCTIONS: Check all the allegations below that you believe apply. If seeking to terminate the rights of more than one parent, attach a separate sheet for the additional parents. If more space is needed for any answer, please attach additional information.

9. **The Court should terminate the parent-child relationship between the children and the**

Father Mother based on the following grounds:

Abandonment: The parent has abandoned the children by failing to provide reasonable support and failing to maintain regular contact with the children, including normal supervision.

Please state the facts supporting this statement:

Neglect/Abuse: The parent has neglected or willfully abused a child.

Please state the facts supporting this statement:

Incapacity: The parent is unable to discharge the parental responsibilities because of mental illness, mental deficiency or a history of chronic abuse of dangerous drugs, controlled substances or alcohol and there are reasonable grounds to believe that the condition will continue for a prolonged, indeterminate period.

Please state the facts supporting this statement:

Criminal Conviction

The parent is deprived of civil liberties due to the conviction of a felony the nature of which proves the unfitness of that parent to have future custody and control of the children.

Please state the facts supporting this statement:

The parent is deprived of civil liberties due to the conviction of a felony and the sentence of that parent is of such length that the children will be deprived of a normal home for a period of years.

Please state the facts supporting this statement:

Paternity

The *potential* father failed to file a paternity action within thirty (30) days of completion of service of notice as prescribed by A.R.S. § 8-106(G).

The *putative* father (one who claims to be the father) failed to file a notice of claim of paternity as prescribed in A.R.S. § 8-106.01.

Relinquishment or Consent

The parent has relinquished his or her right to the children to an agency or has consented to the adoption.

I have attached to this Petition a copy of all applicable relinquishment(s) or consent(s).

Identity Unknown

The identity of the parent is unknown and continues to be unknown following three months of diligent efforts to identify and locate the parent.

Please state the facts supporting this statement:

Other

Parental rights should be terminated for other grounds under A.R.S. § 8-533 as follows:

Please state the facts supporting this statement:

10. Best Interests

It is in the children's best interest to have Father's Mother's rights terminated.

Please state the facts supporting this statement:

11. Social Study

The social study discussed in A.R.S. § 8-536(A) will be completed by the following agency:

I request the social study discussed in A.R.S. § 8-536(A) be waived in the best interest of the children for the following reasons:

RELIEF REQUESTED: Based on the information above, after notice and a hearing Petitioner requests the Court issue an order which:

Terminates the parent-child relationship between the children and their: Father Mother, and

Appoints as guardian of the children and vests legal custody of the children in:

Orders that the parent(s) whose rights are terminated shall remain obligated for child support payments until an adoption order is entered and shall remain obligated for arrearages;

Orders that: (state any other relief requested); _____

and

Any other such orders as the Court deems just and proper.

I DECLARE UNDER PENALTY OF PERJURY THAT THE INFORMATION PROVIDED IN THIS DOCUMENT IS TRUE AND CORRECT

Date

Signature of Petitioner

Printed Name of Petitioner

CONSENT TO PLACE A CHILD FOR ADOPTION and WAIVER OF NOTICE AND APPEARANCE

I, _____, born on _____, am the _____ of
(Parent's Full Name) (Date of Birth) (Relationship)

_____, born on _____, in _____.
(Child's Full Name) (Date of Birth) (City, State, Country)

I am signing this consent to give my permission for _____ to adopt the above
named child. (Full Name of Prospective Adoptive Parent/s)

I understand that my parental rights will be terminated based upon the grounds of this consent to adoption. (A.R.S. § 8-533(B)(7)).

I further understand that I no longer will have any legal rights, privileges, duties and obligations, including the right to custody and the right to visit the child. The only exceptions are that my obligations to pay support and the child's right to inheritance will continue until the child's adoption is final.

At the time the child's adoption is final, the adoptive family will have the same legal rights, privileges, duties and obligations as if the child had been born to them, and all my rights and obligations, including my obligations to pay support and the child's right to inheritance, will be completely ended. (A.R.S. § 8-117)

I am signing this consent freely and voluntarily and not as a result of any fraud, duress or undue influence (*force or trickery*). I understand that once this consent is signed, I cannot revoke (cancel or withdraw) it unless it was obtained by fraud, duress or undue influence. (A.R.S. § 8-106)

I have been advised of the provisions of A.R.S. § 8-106 (E) and **give my permission** **withhold my permission** for this child to obtain identifying information about me and his/herself upon reaching age 18. I understand that my decision to grant or withhold this permission may be changed at any time by filing a notarized statement with the court and this agency.

I voluntarily give up my rights to all notices and appearances to any and all hearings or proceedings in connection with the dependency, severance, and adoption of the above-named child.

I understand that this means I will NOT be notified on any such hearings or proceedings, and that my attendance will NOT be required OR expected. I understand that these hearings and proceedings will take place without my presence, and that the result of the hearings and proceedings most likely will be that ALL my rights to the child, including the right to custody, care, control and visitation will be completely ended.

Dated this _____ day of _____, 20____, at _____ .m.
(DAY) (MONTH) (TIME)

Parent's Signature: _____

Parent's Address: _____

Street Address City State Zip

Signed before me on _____, 20____ at _____
(DATE) (TIME)

My commission expires:

_____ Notary Public: _____

Street Address: _____

City, State, ZIP: _____